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ONE HUNDRED AND NINTH
ANNUAL REPORT

OF THE

South Carolina State
Hospital

FOR THE YEAR ENDING SEPTEMBER 30, 1932

PRINTED UNDER THE DIRECTION OF THE
JOINT COMMITTEE ON PRINTING
GENERAL ASSEMBLY OF SOUTH CAROLINA

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Pediatrics

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Rontgenology

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Pathology

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REPORT OF THE REGENTS

Columbia, S. C., October 1, 1932.

To His Excellency, Ibra C. Blackwood, Governor of South Carolina:

The Board of Regents, in obedience to the Statutes, herewith makes the one hundred and ninth annual report of the operations of the South Carolina State Hospital for the fiscal year ending September 30, 1932. The detailed report of the superintendent covering the same period is attached. Your attention to both is respectfully requested.

The general statistical table shows the movement of the patient population during the year. This table, with supporting data, shows the activities of the hospital in general, and while the Board and the authorities are mindful of the need of conserving the cost of printing as much as possible, the report of the superintendent in addition goes into certain important phases of the work in detail.

The Board feels that its duty is to again call attention to the overcrowding, the net patient population showing an increase of 105 over the previous year. The Board of Regents and the superintendent having found it necessary to use the utmost care in granting admissions, 225 persons who applied for acceptance were refused.

Due largely to our mild climate and the amount of time the patients can stay out of doors or in open porches, 50 square feet per patient is the basis on which the hospital is built, as opposed to a much larger area in many other institutions of similar character. Even with this lessened area we have an overcrowded condition in every department, as follows:

White males	9.5%
White females	13.1%
Colored males	4.5%
Colored females	33.7%

Stated in another way, we have 3378 patients where we should not have more than 2953. This complicates and embarrasses the work of the hospital, not alone from the medical but also from the economic standpoint. In addition, we have been advised by the Chief of the Columbia City Fire Department—

and here we wish to pay a deserved tribute to the efficient and thorough manner in which the Fire Department of the City cooperates with the hospital—that the overcrowded condition in certain wards is an actual fire menace, and that the Mills Building, where a part of the colored female patients are quartered, has been condemned on account of the fire hazard.

The hospital, if it is to fulfill its duty to the people of the State, must have additional quarters, for our records show that many more people are becoming mentally ill under the stress of the depression than in normal times. It is interesting also to note that many of those who are breaking down are of a very high type of citizen, men and women who have been carrying on successfully their own affairs or those of others committed to their charge.

The Board, while fully conscious of the financial straits with which the State is battling, has felt it necessary in the discharge of its duty to those patients now in the hospital and those who will apply for admission hereafter, to ask for \$125,000.00 with which to provide additional accommodations.

We have over a period of years learned in erecting buildings to save every dollar possible consistent with proper medical care and the physical protection of the patients. If the Legislature can see its way clear to grant us this appropriation we will with it erect buildings which, while comfortable and usable, will be stripped of every unnecessary and wasteful detail.

Once more gratification is expressed that during the year the general health of both patients and employees has been good. We had no epidemic.

Appreciation is here recorded of the outstanding work done by the entire personnel of the hospital.

We beg to call your attention and that of the Legislature to the work being done at the institution by the United States Public Health Service in the matter of research and distribution of malaria in the treatment of paresis. Details of this are shown in the superintendent's report. The value of this work becomes more evident as time passes.

NEEDS OF THE HOSPITAL

Based upon a daily per capita cost of \$0.6287 and an estimated patient population of 3486, the Board has requested for main-

tenance for the coming year \$800,000.00. If staple supplies stay at approximately the present levels, and we have a good year both for the farms and the gardens, we believe we can come out on that sum. In our effort to cooperate with the financial authorities of the State, we have placed this estimate as low as we dare and we will do all in our power to run the institution on that basis. However, if there should be a material advance in the price of staple commodities, or if we should have a bad crop year, or an epidemic, we shall probably be forced to ask for additional funds before the year is out.

The Board feels justified in pledging to you and to the Legislature and to the people of the State loyal and devoted service for the coming year on the part of the hospital and its entire personnel. We will to the utmost of our ability continue to care for those already in the institution and to accept as many of those who apply as we can care for, having in mind the present overcrowded condition and the fact that it would be unfair both to those who are accepted under such conditions and to those already in the institution to continue to accept patients when the absolute limit for proper housing and medical care has been reached.

Respectfully submitted

CHRISTIE BENET, Chairman
FRANK H. BARNWELL
A. W. REYNOLDS
DAN'L L. SINKLER
J. E. SIRRINE

Board of Regents, South Carolina State Hospital.

REPORT OF THE SUPERINTENDENT

Columbia, S. C., October 1, 1932.

*To the Board of Regents of the South Carolina State Hospital,
Columbia, S. C.*

Gentlemen: In compliance with your requirements the annual report for the fiscal year ending September 30, 1932 is herewith respectfully submitted.

GENERAL STATISTICS FOR THE YEAR ENDING SEPTEMBER 30, 1932

	White Males	White Females	Colored Males	Colored Females	Total
Patients on books of hospital at beginning of hospital year	901	1,044	835	860	3,640
Admissions during year:					
First admissions	274	183	174	170	801
Re-admissions	100	92	35	40	267
Total received during year	374	275	209	210	1,068
Total on books during year	1,275	1,319	1,044	1,070	4,708
Discharged from books during year	311	232	92	104	739
As recovered	49	59	16	38	162
As improved	110	104	61	54	329
As unimproved	35	46	8	4	93
As without psychosis	117	23	7	8	155
Died during year	58	43	98	73	272
Total discharged and died during year	369	275	190	177	1,011
Patients remaining on books of hospital at end of hospital year:					
In hospital	816	932	799	831	3,378
On parole or otherwise absent	90	112	55	62	319
Total	906	1,044	854	893	3,697

ADMISSIONS

There was a decrease in the number of admissions as compared with the previous year. During the year 1068 patients were received. Of this number, 801 were new admissions and 267 readmissions. There were admitted 374 white men; 275 white women; 209 colored men and 210 colored women. The census at the beginning of the year was 3273 and at the end had increased to 3378.

A study of the diagnostic table reveals that the largest number of first admissions was placed in the manic depressive group, and that dementia praecox was the second largest group.

The decrease in admissions was due to the fact that many persons were refused because of lack of room, 225 being refused admission. This became necessary in order to avoid extreme over-

crowding and to have sufficient room for the acute and violent cases. Although the policy has been to keep down the admission rate and to parole as many patients as possible, overcrowding still exists—the total maximum capacity of the hospital being 2953 and the census on the last day of the year being 3378.

DISCHARGES

There were 739 discharges during the past 12 months. Of this number 162 were listed as recovered; 329 improved; 93 unimproved and 5 transferred to the State Training School.

Of the 155 without psychosis, 67 were alcoholics and 9 drug addicts.

DEATHS

During the year, 272 deaths occurred. According to sex and color—58 white men died or 5.3%; 43 white women or 3.2%; 98 colored men or 9.4%; 73 colored women or 6.8%. The death rate based upon the entire number under treatment, was 5.7%—which is much lower than that of the previous year when it was 7.2%.

The death rate continues higher among the colored. This can be explained by the fact that a great many of them are brought to the hospital in extremely poor physical condition.

The reduction in deaths may be attributed partly to the decrease of pellagrins, and also to the refusal of many patients whose physical condition was critical.

GENERAL HEALTH

The health of the patients and employees was good.

It is with deep regret that three suicides and two accidental deaths are reported: one white man and one white woman by hanging and one white woman by a poisonous drug; one white man and a colored woman as the result of accidental burns.

MEDICAL DEPARTMENT

No changes occurred in the personnel of the medical staff.

The census at State Park for colored men and women having reached 1215 it was deemed advisable to have another physician

on the premises. Dr. S. B. McLendon was, therefore, transferred to State Park on January 30, 1932.

Dr. Roderick Macdonald, assistant physician and ophthalmoto-laryngologist, was granted a leave of absence the first of the year and spent four months in special work in Vienna. While away, Dr. Walter J. Bristow, a member of the consulting staff, performed whatever work was necessary in this department.

Staff meetings were held regularly—once a week in each department.

In last year's report it was noted that Dr. Bruce Mayne, special expert of the U. S. Public Health Service in the study of malaria therapy of paresis, had established a laboratory at the State Hospital. He and his co-workers are still carrying on valuable work, are rendering a great service to the hospital and by their research have made several discoveries which are important contributions to medicine. Special attention is called to his report found elsewhere.

Mr. J. M. Albergotti, Jr., senior medical student, University of Pennsylvania, acted as junior interne during the summer months.

The work of the medical department was satisfactory. The excellent standard of medical care, built up over a period of years, was maintained.

During the year the medical staff had the privilege of honoring one of its members who had the unusual distinction of celebrating his fiftieth anniversary of continuous service with the hospital.

On the evening of October 10, 1931 Dr. James L. Thompson on the occasion of his fiftieth anniversary was given a dinner to which several of his associates and life long friends were invited.

During the course of the dinner Hon. Christie Benet, Chairman of the Board of Regents, in his usual charming and forceful way, spoke of the career of Dr. Thompson and paid tribute to the valued service he has, and is still rendering to the hospital and mentioned in beautiful terms the happiness he has been the means of bringing into thousands of homes in the State during his long years of service.

As a token of esteem and affection a loving cup was presented to him by the medical staff.

At his own request Dr. Thompson was several years ago transferred from active medical work to the position of chief clerk of the medical records, in which capacity he continues to serve.

SURGICAL DEPARTMENT

The following table shows the operations performed by the consulting and resident staff. Appreciation is expressed for the valuable service rendered by the consulting staff.

Operations were performed on 20 patients from the S. C. Penitentiary, and care and treatment in the hospital provided for them until they were well enough to be removed.

Of these patients 6 were white men and 14 colored men. The total number of days they remained in the hospital was 390.

OPERATIONS PERFORMED ON PATIENTS FROM THE S. C. PENITENTIARY

Appendectomies	5
Abscesses of old appendectomy wounds	3
Inguinal abscess	1
Post-urethral abscess	1
Removal of testicle	1
Herniotomies	8
Hydroceles	2
Resection urinary fistula	1
Cystoscopic examinations	3

OPERATIONS PERFORMED FROM OCTOBER 1, 1931 THROUGH SEPTEMBER 30, 1932

Appendectomies	11
Blood transfusions	5
Cholecystectomies	1
Carcinoma on neck	1
Carcinoma on head	1
Carcinoma—both breasts	1
Exploratory laparotomy	1
Hemorrhoidectomies	10
Herniotomies	11
Hysterectomies	3
Tuberculosis of intestines	1
Amputation of leg	1
Abscess on buttocks	1
Abscess on back	1
Cysts on back	2

Fractures and plaster casts:

Arm	3
Hip	3
Foot	11
Leg opened and cast applied	1
Ankle opened and cast applied	1
Wrist	1

UROLOGIC CLINIC

The work accomplished by the urologic department is shown in the following table.

Urethroscopic examinations	51
Cystoscopic examinations	65

Conditions treated:

Chancroids	8
Gonorrhea	39
Stricture urethra	31
Stricture ureter	8
Epididymitis	6
Orchitis	3
Varicocele	2
Phimosis	1
Hypertrophy of prostate	30
Psychopathia sexualis	19
Essential hematuria	1
Cystitis	30
Diverticulum of bladder	1
Vesical calculus	3
Paralysis of bladder from cord lesion	2
Granuloma inguinala	1
Nephroptosis	5
Nephrolithiasis	13
Urethral stone	1
Hydro-nephrosis from obstruction of ureter	4
Hydro-nephrosis from accessory renal artery	1
Pyelitis	14
Syphilis—for standardized and intensive treatment ..	40
Tuberculosis of kidney	1
Hydrocele	5
Inguinal adenitis, tubercular	1
Ring worm of genitalia	3
Seminal vesiculitis	2
Eczema	1
Herpes	3

Specific Treatments:

Topical applications	3
Mechanical obstruction of external genitalia	1
Peri-urethral abscess with urinary extravasation	1
Urethral stricture with extravasation	1
Circumcision	3
Removal of stones from urethra	1
Removal of stones from bladder and ureter	4
Drainage of ischio-rectal abscess	1
Vaginal abscess	1
Drainage supra-pubic	1
Internal urethrotomy	6
Papilloma of urethra removed	1
Uroselectan	6
Nephrectomy	1
Neo—and sulph-arsphenamine—doses	610
Bismuth—doses	569
Mercurisol—doses	27
Medication through vasotomy	1
Mercuric salicylate	55
Dilatation strictures	201
Kidney lavage	37
Obstruction of urethra from tumor	1
Drainage hydrocele	3
Radical hydrocele operations	4
Resection of vesical fistula	2
Resection vesicle neck obstruction under spinal anes- thesia	4
Vesical neck obstruction from tumor	1
Cauterization of cervix	10
Cauterization vera	20
Orchidectomy	1
General parietic cases treated with typhoid para-typhoid bacterine	25
Prostatic treatments with Bradford-Lewis heater	7
Office treatments—irrigation, prostatic massages, etc., not otherwise listed	711

EYE, EAR, NOSE AND THROAT CLINIC

The detailed report given below shows in particular the nature and amount of work performed in this department:

EYE

External diseases, including stytes, chalazions, iritis, conjunctivitis, etc.	83
Ophthalmoscopic or eye ground examinations	726
Trauma various parts eye	36
Refractions under cycloplegics	98
Cataract removed—local anesthetic	8
Cataract removed—ether anesthetic	1
Foreign bodies removed	8
Enucleation—general anesthetic (ether)	1
Enucleation—local anesthetic	1
Trichiasis	2
Alternating squint corrected—ether anesthetic	4
Phthisis bulbi	1
Tear sac removed—local anesthetic	1
Chalazion operation—local anesthetic	1
Optical iridectomy	1
Needling—secondary cataract	1

EAR

Routine examinations	125
Furuncle—external auditory canal	15
Cerumen or wax removed	39
Eustachian catheterization	111
Acute purulent otitis media	16
Chronic catarrhal otitis media	2
Acute catarrhal otitis media	2
External otitis media	1
Trauma	3
Foreign body removed	2
Post auricular abscess	1
Ligation internal jugular vein—ether anesthetic	1
Fungus infection	3
Haematoma auricle	1
Eczema—external ear	2

NOSE AND THROAT

Routine examinations of nose	464
Furuncle, nose	15
Acute colds	71
Nose bleed	2
Submucous resection nasal septum—local anesthetic	35
Radical ethmoidectomy and sphenoidectomy— ether anesthetic	2
Bilateral ethmoidectomies—local anesthetic	2
Turbinectomies—local anesthetic	3
Acute maxillary sinusitis	1
Acute frontal sinusitis	5
Antrum opened and irrigated—local anesthetic	2
Ulcer nasal septum	1
Atrophic rhinitis	1
Acute ethmoiditis	2
Excoriated vestibule of nose	1
Lacerated and contused wound of nose	2
Trauma, nose	3
Routine examinations of throat	568
Larynx examinations	27
Examination of larynx—paralysis of one cord	1
Vincent's angina	2
Tuberculosis of larynx	1
Cut throat—self-inflicted	1
Acute tonsillitis	51
Acute pharyngitis	2
Sub-acute pharyngitis	1
Acute laryngitis	9
Infected lip	1
Foreign body in esophagus	1
Supra-tonsillar abscess	1
Block tonsillar crypt	1
Adenoidectomies—ether anesthetic	9
Tonsillectomies—local anesthetic	84
Tonsillectomies—ether anesthetic	33
Mastoidectomies—conservative—under ether anesthetic ...	8
Mastoidectomy—radical—ether anesthetic	1
Mastoidectomy—conservative—local anesthetic	1
Cultures, smears and X-ray examinations made whenever indicated	

LABORATORY

The personnel of this department remains unchanged. The statistical table reveals the accomplishments in the pathological and the X-ray laboratories.

PATHOLOGICAL

Wassermann on blood	1,281
Wassermann on spinal fluid	419
Routine examination spinal fluid	419
Wassermann on blood—miscellaneous	100
Wassermann on spinal fluid—miscellaneous	6
Blood counts	700
Malaria	83
Feces	15
Blood urea	15
Blood sugar	24
Clotting time blood	38
Smears from throat	1
Prostate smears	7
Sputum	11
Smears from urine	2
Smears from eye	1
Gastric examinations	1
Creatinin	3
Vaginal smears	2
Kidney functional tests	20
Mastic tests	3
Colloidal gold	3
Sections cut	45
Urinalysis	1,505
Autopsies	14

X-RAY

X-ray exposures	334
Fluoroscopic examinations	5

PHYSIOTHERAPY

Mercury Quartz Light treatments	77
Diathermy treatments	4
Basal metabolic tests	26

PERCENTAGE OF POSITIVE BLOOD WASSERMANN'S
From September 30, 1931 to October 1, 1932

White Males			White Females			Colored Males			Colored Females		
Positive	Negative	Per Cent.	Positive	Negative	Per Cent.	Positive	Negative	Per Cent.	Positive	Negative	Per Cent.
10	411	2.37	11	312	3.40	64	312	22.3	43	207	17.2

PERCENTAGE OF POSITIVE SPINAL FLUID WASSERMANN'S

9	63	12.5	4	24	14.3	60	202	22.9	11	46	19.3
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DENTAL CLINIC

The following table shows the work done in this clinic:

Examinations	3,245
Anesthetics	2,204
Extractions	3,400
Impactions removed	18
Bridges removed	23
Gold crowns removed	15
Alloy fillings	93
Porcelain fillings	36
Cement fillings	1
Temporary fillings	11
Dentures	28
Dentures repaired	20
Bridges	2
Bridges repaired	8
Bridges reset	1
Gold inlays	1
Gold inlays reset	2
Gold crowns repaired	3
Gold crowns reset	2
Vincent's angina treatments	2
Treatments	366
Patients ordered to bed	146
Visits to wards	25
X-ray exposures	410

Tooth brushes distributed	261
Requisitions—for money for dental work not furnished by the hospital	106
Deposits—money received in compliance with requests ...	34

MENTAL HYGIENE

The activities of this department have been continued during the past year in conjunction with the Social Service Department. It is the hope and aim of the Mental Hygiene Department that it may ultimately function chiefly in an educational and preventive rather than in a remedial way. While working toward that end, much time is now devoted to the holding of clinics, where patients are examined, diagnosed, and treatment offered. These clinics are conducted in the lower half of the State as follows:

Columbia—on Monday of each week—at the Columbia Hospital.

Orangeburg—on alternate Wednesdays—at the County Health Office.

Florence—on alternate Thursdays—at the A. C. L. "Y" Building.

Charleston—on alternate Fridays—at Roper Hospital in A. M.; at 110 Wragg Square in P. M.

In the upper half of the State, clinics are held at:

Rock Hill—on alternate Tuesdays—at Fennell Infirmary.

Spartanburg—on alternate Wednesdays—at Spartanburg General Hospital.

Greenville—on alternate Thursdays—at Greenville City Hospital.

Anderson—on alternate Fridays—at the Anderson County Hospital.

The following table shows the number of visits to all of the clinics during the year, classified according to the race and sex of the patients:

	W. M.	W. F.	C. M.	C. F.	Total
New patients	206	174	23	13	416
Paroled patients	30	31	4	0	65
Return visits for treatment	595	518	50	13	1,176
Consultations (physicians)	27	27	9	3	66
Totals	858	750	86	29	1,723

Of the patients attending the clinics, a considerable number come voluntarily, but the majority are referred by physicians, by social agencies, or by the schools. Where a case is referred by a physician, the staff naturally tries to carry out the indicated treatment through the referring or family physician. Likewise, where a patient is referred by a social agency, the greatest good can usually be accomplished by close cooperation with the agency in the management and treatment of the patient. If the public school is the point of contact, the patient is usually a child, and it then becomes necessary for the clinic, the school, and the home to join forces in handling the case to the best advantage of the patient.

Such cases as the last named offer the greatest opportunity for educational and preventive work, it being possible in a number of instances to obviate the probable development of a true psychosis later in life. The public schools are turning more and more to the clinics with their "problem children," and the services of a psychologist are sorely needed for the proper handling of these cases. The department has been greatly hampered in this respect since it no longer has the able assistance of Miss Norma Hallett of the State Training School, and it feels a very real need for a psychologist on the staff.

The department feels keenly its responsibility in rendering an educational service wherever opportunity offers. During the past year, members of the staff have given talks and lectures in various parts of the State to diversified groups, including medical men, parent-teacher organizations, and social welfare agencies. A series of lectures was given to the Nurses' Training School at the Columbia Hospital, at the Spartanburg General Hospital, and at the Greenville City Hospital. Also, a series of lectures on "Mental Hygiene in the Schools" was delivered at the summer school for teachers at Limestone College, and at Winthrop College.

The clinic staff affords a direct point of contact between the public and the State Hospital. The staff encourages a freer use of the clinics in cases where there is a possibility of commitment to the hospital, and through this service the patient is frequently enabled to make an adjustment and commitment avoided. This is of particular importance, not only from the standpoint of the individual himself, but because of the present severe overcrowding in the hospital, and the necessity for refusing admission to

many who are in need of treatment. Also, the department is of assistance to the superintendent in passing upon certain applications for admission to the hospital, in that after observing a patient in the clinic, the staff is in position to render an opinion as to whether or not the patient should enter the hospital. This service is augmented by consultations with practicing physicians throughout the State, in which suggestions are offered for their guidance in handling mental cases in an effort to prevent the necessity for hospitalization. There have been 66 such consultations during the past year.

Those who have been at the State Hospital for treatment and have returned home are encouraged to attend the clinics. Many avail themselves of this opportunity and by doing so are enabled to adjust themselves at home, whereas it would otherwise become necessary for them to return to the hospital.

SOCIAL SERVICE

The work of the Social Service Department falls into three classes: hospital work, which is concerned with the welfare of the patients in the hospital and those on parole: clinic or preventive work through the community clinics: and educational work in regard to mental hygiene principles.

The hospital work is divided into three definite types: securing histories of patients in the hospital, pre-parole and parole work.

Before a diagnosis can be made and treatment planned for many of the patients admitted to the hospital, additional background and history are necessary. The social worker visits the communities from which these patients come, consults members of the family, the employer and the family physician. As many contacts as possible are made in an effort to secure facts concerning the family and personal history.

Thorough investigation of all criminal cases committed to the hospital by Order of the Court is also made by the social service department.

While every effort is made in the hospital to prepare patients to adjust themselves again to life in the community to which they are returning, the success of this adjustment is largely dependent on the attitude of the family and friends. The social worker visits the homes and prepares the relatives and friends

to receive them. It is very important that they be made to feel at ease in the surroundings and not to feel that they have been disgraced because they have been to the State Hospital, or that their breakdown has rendered them useless and marred their future. The social worker can render no greater service to the paroled patients than to build up for them before they leave the hospital a kindly feeling of understanding and tolerance in the community.

Not all patients who leave the hospital have relatives to whom they may turn for assistance. For those who are alone in the world the social worker secures work. If they are old and feeble, arrangements are made for them to be cared for in the county home of their respective counties.

The social worker keeps in touch with as many paroled patients as possible after they leave the hospital and continues the contact as long as it seems advisable. By these visits difficulties are frequently smoothed out and the patients are assisted in making better adjustments in the home life and in the life of the community.

In addition to the hospital and clinic work, the department is constantly being called upon by various organizations for educational work in regard to mental hygiene subjects. Informal talks have been given before clubs, parent-teacher associations and college groups over the State.

TRAINING SCHOOL FOR NURSES

There were no changes in the personnel of the heads of the nursing department.

Miss Beulah L. Gardner continues as superintendent of nurses and is assisted by Mrs. J. W. Austin and Miss Annie Flowers. Miss Moye Swann is supervisor at State Park and Mrs. J. H. McDowell is night supervisor in the city.

Supervisors in the white male service are: Mr. C. Y. Nesbit in charge, assisted by Messrs. D. T. Albert, J. K. Riley and J. E. Kelly. Messrs. W. J. Cooper and O. C. Brown are supervisors at State Park.

On June 9th the 15 nurses who had completed their nine months affiliation course at Roper Hospital, Charleston, received certificates from that institution.

On June 10th they were awarded diplomas at the graduation exercises held at the State Hospital.

The prize of the Woman's Auxiliary of the Columbia Medical Society was given to Mrs. Annie A. Bowling for attaining the highest average in scholarship.

Members of the 1932 graduation class were:

Mrs. Annie Arrants Bowling, Misses Bonnie Dale Cox, Susie Blanche Campbell, Maye Crosby, Ruth Chappell, Azilee Haltiwanger, Ruby Van Haltiwanger, Clara E. Fraley, Cora D. Love, Lottie Harriett Love, Juanita Essie Redmond, Elizabeth Reynolds, Nora Ridlehoover, Delle Curlee Snelgrove and Nelle Ruth White.

OCCUPATIONAL THERAPY

A great deal was accomplished by the directress and her assistants in this department, although greatly handicapped by lack of space and equipment.

During the year many patients found other forms of occupation outside the class rooms. Besides working in gardens and on the yards and farms, they assisted with ward work, in the bakery, dairies and in every phase of hospital activity.

AMUSEMENTS

Recreation and amusement play an important part in helping patients to adapt themselves and in bringing about improvement and often recovery. For these reasons they have been provided as much as possible.

Some of the forms of entertainment enjoyed by the patients were: Field Day on October 14th, a Halloween party, Christmas celebration, the circus parades and performances, State Fair for both white and colored, sound-on-film moving pictures, dances, and occasional truck rides about the city.

During the summer a group of men, mostly from the city, organized a baseball team and played a number of games on the hospital grounds, thus providing another source of enjoyment for the patients.

RELIGIOUS SERVICES

Religious services were conducted by Rev. Wm. H. Stender who also directed services for the employees once a week, at-

tended staff meetings, visited patients on the wards and conducted services for all patients interred in the hospital cemetery.

The hospital was often visited by ministers from the city who called upon patients of their denominations.

IMPROVEMENTS AND REPAIRS

Although it has always been the policy of the hospital management to keep the physical part of the plant in good condition in order to prevent deterioration, only necessary repairs were made during the year. The former residence of the chief engineer was renovated for occupancy by graduate nurses. The completion of three bungalows for two members of the staff and the treasurer left the former home of the treasurer available for the chief engineer. By these changes the capacity for white female patients was considerably increased.

Two buildings, each with a capacity of 50, were completed—one for white women, and another for colored women at State Park.

The old boiler room to the rear of the laundry was remodeled into a fire-proof two story structure. The lower floor is being used as a machine shop and the upper as an addition to the laundry as a marking and mending room.

NEEDED IMPROVEMENTS

The greatest need of the hospital at present, as has been stated in previous reports, is more room. The hospital is greatly overcrowded. The maximum capacity of the institution is exceeded by 425 patients. If the best results are to be obtained in bringing about improvement of patients, one of the first essentials is proper housing and the avoidance of overcrowding. It is earnestly hoped that provision will be made to care for this situation which is very acute.

FIRE DEPARTMENT

Regular inspections relative to fire hazards were made by Mr. E. M. Dickert, who in addition to his other duties is chief of the fire department of the hospital.

Fire drills were held for patients and employees.

During the year lectures and demonstrations on fire prevention were given by Chief Marsh and his men of the Columbia Fire Department. Grateful appreciation is expressed to them for their cooperation and assistance.

On July 12th and 13th the hospital fire department attended the State tournament at Sumter, winning second prize in the reel race and fourth prize in the wagon contest.

CRIMINAL INSANE

During the past 12 months 7 patients were committed by the Order of the Court of General Sessions. Of these one was found to be insane and six not insane.

Attention is again called to the need of a proper building for the criminal insane. Aside from the desire to hold securely these dangerous patients, it is hardly fair to the patient population generally to force them to live in contact with those of violent tendencies.

VOLUNTARY COMMITMENTS

This method of commitment is to be preferred. When an individual commits himself there is usually better cooperation and he is able to better adapt himself to the environment. On account of lack of room, however, only those in urgent need were permitted to enter the hospital voluntarily. There were 35 voluntary commitments during the year.

ACKNOWLEDGMENTS

Sincere appreciation is expressed to the many friends of the hospital who during the year contributed sums of money and numerous gifts of various kinds for the pleasure and benefit of the patients.

From an administrative standpoint the year was a successful one, and this success was largely due to the loyal support and cooperation of the officers and employees to whom grateful acknowledgment is made.

Sincere thanks are expressed to members of the Board of Regents for their constant interest and wise counsel in determin-

ing policies and in the solution of problems pertaining to the hospital.

Respectfully submitted

C. F. WILLIAMS

Superintendent.

CONTINUED PROGRESS REPORT OF THE MA-
LARIA THERAPY SECTION OF THE
UNITED STATES PUBLIC HEALTH
SERVICE

Columbia, S. C., September 30, 1932.

*Dr. C. F. Williams, Superintendent, South Carolina State Hos-
pital, Columbia, South Carolina.*

Dear Doctor Williams: I am submitting herewith a progress report of the activities produced through the concerted investigations of the State Hospital and the United States Public Health Service.

We have made an effort to continue the cooperative plan of establishing a central depot for the distribution of material employed in malaria therapy of paresis throughout the United States. We have availed ourselves of the facilities generously offered through the State Hospital as a foundation for the work instituted last year. It has been gratifying to note that when the order for retrenchment on account of the economic conditions prevailing went into effect, every effort was sustained for continuing this work at the State Hospital.

It has been our privilege to offer two distinctive contributions to the progress of malaria therapy in the United States:

1. Successful infection to the sporozoite stage of mosquitoes with the parasites of quartan malaria—the first instance recorded in any country.

2. The establishing of a quartan strain for the United States, with centers inaugurated at Tallahassee, Florida; Baltimore, Maryland; and Columbia, South Carolina. This is the first instance of the employment of a quartan strain of malaria therapy in this country. The quartan strain was established through the efforts of this station the natural case having been obtained from the town of Dubach, La., through the courtesy of Dr. T. B. H. Anderson, medical officer in charge of the United States Marine Hospital at New Orleans, La.

At the local institution we have been successful in starting what is popularly known as the mosquito farm, offering a stock of insect carriers for uninterrupted work in the transmission of malaria for use throughout the United States. The original material for this mosquito stock farm was gathered

from points as remote as Texas and Florida. It would have been difficult to stock the insectary from the material collected locally on account of the dearth of anopheline mosquitoes, the carriers of malaria in this section of South Carolina. The continuous stocking of this insectary is of great importance because of the general absence of material during the dormant winter period. It is essential that provision for this material be made in advance.

The work was interrupted for a period of ten weeks on account of a study tour by the officer in charge of European medical centers where malaria therapy is applied in the treatment of mental disorders. The following research centers were visited: London and Epsom, in England; the Hospital for Tropical Diseases and the Weygandt Clinic, at Hamberg, Germany; the Charity Hospital, at Paris; and the Wagner von Jauregg Clinic, Vienna. The major portion of the available time was spent at Horton Mental Hospital, Epsom, where an intensive study was made of new methods of infection and transportation of malaria—conveying mosquitoes. The malaria laboratory is maintained by the British Ministry of Health.

In the course of the work with malaria, two new remedies have been tested—namely, plasmochin and atebirin. With the first we have demonstrated that this drug not only cures malaria in patients after a few courses of treatment, but it also renders the patient's blood non-infectious for mosquitoes for long periods. It is of value therefore when patients are discharged from the hospital, acting as an effective prophylactic against community infection. With atebirin, a new malaria remedy was demonstrated for the United States, giving promise of tremendous economy in the treatment of this disease by inducing a cure after only five days of administration. So far, after four months of its use, no relapses have been observed.

It is considered of more than ordinary interest and importance to note that on account of the relatively high immunity to induced malaria exhibited by colored patients a strain of plasmodium is found in the quartan type which effectively overcomes this refractoriness. The following table prepared by senior medical technician, H. E. Hingst, at this station shows at a glance the relative reaction of white and colored patients to blood inoculation of the two species of malaria parasites.

Species of Plasmodium	Total Number of Blood Inoculations				Percentage of Takes	
	White		Colored		White	Colored
	Pos.	Neg.	Pos.	Neg.		
<i>P. Vivax</i> (tertian)	5	0	3	32	100	8.8
<i>P. Malariae</i> (quartan)	2	0	24	2*	100	92.3

*These subsequently reacted to a second injection of quartan.

It is of additional interest in this regard to indicate the degree of refractoriness in the colored patient toward the tertian type of induced malaria and the apparent greater potency of the quartan strain. In several instances colored patients did not react to repeated injections of relatively large quantities of tertian blood, but proved immediately susceptible to a single injection of the more potent quartan type. In the table below seven colored patients failed to respond to as many as five injections with tertian malaria blood given over a period of six to eight months. After a suitable interval they all reacted to a single injection of the blood of a quartan case.

Number of Patients Re- ceiving Tertian Blood	Number of Injections of Tertian Blood Prior to a Single Injection of Quartan
1	1
2	2
1	3
2	4
1	5
—	—
Total 7	15

TABLE SHOWING TOTAL NUMBER OF MALARIA INOCULATIONS
AND MODE OF ADMINISTRATION

Mode of Inoculation	White	Colored	Total
Blood Containing <i>P. Vivax</i>	2	13	15
Mosquito Sporozoites	5	9	14
Mosquito Biting	11	2	13
Quartan Injection	3	13	16
Total	21	37	58

MISCELLANEOUS ACTIVITIES

List of institutions to Which Mosquitoes were Contributed for Malaria Inoculations:

Baylor University Hospital, Texas; United States Marine Hospital, Baltimore, Md.; United States Naval Hospital, Philadelphia, Pa.; Farnhurst State Hospital, Delaware.

Citrated Blood Containing P. Vivax, Obtained from Patients at the State Hospital, sent to:

State Hospital, Cantonsville, Md.; University of Pennsylvania Hospital, Philadelphia, Pa.; N. C. State Hospital, Morganton, N. C.; U. S. Naval Hospital, Philadelphia, Pa.; University of Virginia Hospital, Richmond, Va.; U. S. Marine Hospital, Key West, Fla.

Blood smears examined for State Hospital other than routine checking up	81
Blood smears examined for local physicians and individuals	43

Total	124
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Total number of mosquitoes applied in malaria therapy through the use of patients offered by the State Hospital:

Quartan infection	339
Tertian infection	514

Total	853
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Respectfully submitted,

BRUCE MAYNE.

STATISTICAL TABLES

PSYCHOSES OF FIRST ADMISSIONS

PSYCHOSES	White Males	White Females	Colored Males	Colored Females	Total
Senile psychoses	4	11	7	8	30
Psychoses with cerebral arteriosclerosis	23	4	13	4	44
General paralysis	6	1	16	10	33
Psychoses with cerebral syphilis	2	..	3	1	6
Psychoses with brain tumor	1	..	..	..	1
Psychoses with other brain or nervous diseases, total	4	2	2	..	8
Other diseases	4	2	2	..	8
Alcoholic psychoses, total	7	..	7	..	14
Delirium tremens	5	..	3	..	8
Acute hallucinosis	1	..	2	..	3
Other types, acute or chronic	1	..	2	..	3
Psychoses due to drugs and other exogenous toxins, total	1	1	..	..	2
Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined	1	1	..	..	2
Psychoses with pellagra	7	6	..	..	13
Psychoses with other somatic diseases, total	10	12	17	14	53
Cardio-renal diseases	8	10	16	13	47
Other diseases or conditions	2	2	1	1	6
Manic-depressive psychoses, total	46	41	34	35	156
Manic type	19	21	28	31	99
Depressive type	27	19	6	4	56
Other types .....	..	1	..	..	1
Involution melancholia	4	8	..	..	12
Dementia praecox (schizophrenia)	22	31	27	32	112
Paranoia and paranoid conditions	4	11	..	..	15
Epileptic psychoses	10	10	14	8	42
Psychoneuroses and neuroses, total	12	18	..	..	30
Hysterical type	3	9	..	..	12
Psychasthenic type (anxiety and obsessive forms)	1	1	..	..	2
Neurasthenic type	8	8	..	..	16
Psychoses with mental deficiency	5	5	4	11	25
Undiagnosed psychoses	8	6	4	1	19
Without psychosis, total	98	16	15	13	142
Epilepsy without psychosis	2	..	2	1	5
Alcoholism without psychosis	60	1	1	1	63
Drug addiction without psychosis	4	1	..	..	5
Psychopathic personality without psychosis	3	..	..	..	3
Mental deficiency without psychosis	8	8	6	6	28
Others	21	6	6	5	38
TOTAL	274	183	174	170	801

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
WHITE RACE

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T			
Senile	4	11	15	1	1	2	..	2	2	2	..	4	4	4	4	..	2	2	3	4	7		
With cerebral arteriosclerosis	23	4	27	1	2	2	..	2	2	2	4	4	..	4	4	4	..	2	2	3	1	4	7	
General paralysis	6	1	7	1	..	1	2	..	2	1	..	1	..	1	1	2	2	2	2	2	1	1	
With cerebral syphilis	2	..	2	1	..	1	1	
With brain tumor	1	..	1	1	..	1	..	1	
With other brain or nervous diseases	4	2	6	1	..	1	1	..	1	2	2	1	2	..	1	1	1	..	1	
Alcoholic	7	..	7	1	..	1	2	..	2	1	..	1	2	..	2	1	..	1	..	1	
Due to drugs and other exogenous toxins	1	1	2	1	..	1	
With pellagra	7	6	13	1	1	1	1	2	..	2	2	3	..	3	1	1	2	1	1	..	1	1	
With other somatic diseases	10	12	22	1	2	3	..	2	2	3	2	2	3	1	2	3	1	2	3	1	4	1	2	3	
Manic-depressive	46	41	87	2	2	4	10	8	18	9	4	13	5	8	13	8	5	13	1	6	7	3	6	9	12	..	2	5	2	7	1	..	1	
Involution melancholia	4	8	12	1	1	..	1	1	1	..	3	3	3	6	1	..	1	
Dementia præcox	22	31	53	..	4	4	5	..	5	9	6	15	1	4	5	2	5	7	3	7	10	1	3	4	1	1	2	..	1	1	
Paranoia and paranoid conditions	4	11	15	1	1	2	..	1	1	1	..	1	1	2	3	1	3	4	..	2	2	..	2	2	
Epileptic psychoses	10	10	20	3	1	4	3	5	8	2	2	4	1	2	3	1	..	1	5	5	2	2	4	1	..	1	..	2	2	1	..	1	
Psychoneuroses and neuroses	12	18	30	1	1	2	3	2	5	2	..	2	..	3	3	2	3	5	..	5	5	2	2	4	1	..	1	..	2	2	1	..	1	
With mental deficiency	5	5	10	1	1	2	1	2	3	1	1	2	..	1	1	2	2	2	
Undiagnosed psychoses	8	6	14	1	..	1	1	2	3	1	2	3	1	1	2	3	2	1	3	1	..	1	..	1	1	1	1	..	1	
Without psychosis	98	16	114	4	1	5	3	..	3	11	2	13	6	..	6	13	4	17	15	4	19	15	1	16	7	2	9	15	..	15	6	2	8	1	..	1	1	..	1	1	..	1	
TOTAL	274	183	457	4	5	9	14	4	18	38	23	61	27	15	42	29	26	55	36	29	65	26	23	49	24	19	43	29	9	38	28	14	42	9	8	17	4	4	8	6	4	10

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
COLORED RACE

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T						
Senile	7	8	15	1	1	2	5	5	2	1	3	3	1	4	1	..	1		
With cerebral arteriosclerosis	13	4	17	2	2	4	..	1	1	1	1	2	3	1	4	4	2	6	..	3	..	1	1	2			
General paralysis	16	10	26	1	..	1	2	2	4	2	1	3	2	2	4	..	1	1	1	1	2	3	1	4	4	2	6	1	..	1			
With cerebral syphilis	3	1	4	1	1	1	..	1	1	..	1	1	..	1		
With other brain or nervous diseases	2	..	2	1	..	1	1	..	1		
Alcoholic	7	..	7	1	3	..	3	2	..	2	1	3		
With pellagra	11	33	34	1	4	5	..	5	5	1	4	5	2	5	7	3	7	10	2	3	3	2	1	2	1	3	4		
With other somatic diseases	17	14	31	1	1	1	1	1	1	1	3	4	3	2	5	2	1	2	1	3	2	4	6	4	1	5	1	1	2	2	..	2	1	1	2	..	
Manic-depressive	34	35	69	7	4	11	10	9	19	9	2	11	2	6	8	2	5	7	2	5	7	1	1	2	1	2	3	3	..	1	1	
Dementia praecox	27	32	59	..	1	1	3	6	9	11	3	14	5	7	12	1	4	5	4	5	9	1	3	4	2	1	3	..	2	2	
Epileptic psychoses	14	8	22	..	1	1	4	1	5	5	1	6	3	1	4	1	3	4	1	..	1	1	1	
With mental deficiency	4	11	15	..	2	2	1	4	5	2	3	5	1	1	1	..	1	1	1	1		
Undiagnosed psychoses	4	1	5	1	1	2	1	..	1	1	..	1	1	1	
Without psychosis	15	13	28	3	6	9	2	1	3	3	..	3	1	1	2	3	..	3	..	1	1	..	4	4	2	..	2	1	1	
TOTAL	174	170	344	3	10	13	19	21	40	34	23	57	24	18	42	17	21	38	14	23	37	13	19	32	12	9	21	14	14	28	7	2	9	6	7	13	4	1	5	6	2	8	1	..	1

DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES
WHITE RACE

PSYCHOSES	Total			Illiterate			Reads and Writes			Common School			High School			College			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	4	11	15	2	3	5	..	1	1	2	4	6	..	1	1	..	2	..	..	..	..
With cerebral arteriosclerosis ..	23	4	27	2	1	3	8	1	9	9	1	10	4	1	5	..	..	..	..	..	..
General paralysis	6	1	7	..	..	..	1	..	1	4	1	5	1	..	1	..	..	..	..	..	..
With cerebral syphilis	2	..	2	..	..	..	..	..	..	1	..	1	1	..	1	..	..	..	..	..	..
With brain tumor	1	..	1	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..
With other brain or nervous diseases	4	2	6	..	..	..	1	..	1	2	1	3	..	1	1	1	..	1	..	..	..
Alcoholic	7	..	7	1	..	1	..	1	..	1	3	..	3	1	..	1	..	1	..	..	..
Due to drugs and other exogenous toxins	1	1	2	..	..	..	..	1	1	..	..	..	..	..	..	1	..	1	..	..	..
With pellagra	7	6	13	2	..	2	1	1	2	4	5	9	..	..	..	..	..	..	..	..	..
With other somatic diseases ..	10	12	22	3	4	7	4	3	7	3	4	7	..	1	1	..	..	..	..	..	..
Manic-depressive	46	41	87	3	3	6	4	6	10	26	18	44	8	10	18	5	4	9	..	..	..
Involution melancholia	4	8	12	1	2	3	..	1	1	2	3	5	..	2	2	1	..	1	..	..	..
Dementia præcox	22	31	53	2	..	2	1	6	7	7	17	24	8	3	11	4	5	9	..	..	..
Paranoia and paranoid conditions	4	11	15	1	..	1	1	..	1	..	4	4	..	5	5	2	2	4	..	..	..
Epileptic psychoses	10	10	20	2	1	3	1	4	5	6	3	9	1	2	3	..	..	..	..	..	..
Psychoneuroses and neuroses ..	12	18	30	2	..	2	1	1	2	5	10	15	4	2	6	..	5	5	..	..	..
With mental deficiency	5	5	10	3	2	5	1	1	2	1	1	2	..	1	1	..	..	..	..	..	..
Undiagnosed psychoses	8	6	14	2	..	3	2	1	3	2	2	5	..	1	1	..	..	..	..	2	2
Without psychosis	98	16	114	12	5	18	14	3	17	49	8	67	11	..	11	11	..	11	..	..	..
TOTAL	274	183	457	40	21	61	41	30	71	128	82	210	39	30	69	26	18	44	..	2	2

DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES
COLORED RACE

PSYCHOSES	Total			Illiterate			Reads and Writes			Common School			High School			College			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	7	8	15	4	5	9	..	..	..	1	1	2	1	..	1	..	..	..	1	2	3
With cerebral arteriosclerosis ..	13	4	17	7	3	10	2	..	2	3	1	4	..	..	..	..	..	..	1	..	1
General paralysis	16	10	26	4	7	11	3	..	3	6	3	9	1	..	1	..	..	..	2	..	2
With cerebral syphilis	3	1	4	2	..	2	1	..	1	..	1	1	..	..	..	..	..	..	..	..	..
With other brain or nervous diseases	2	..	2	1	..	1	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..
Alcoholic	7	..	7	1	..	1	2	..	2	..	3	..	3	1	..	..	..	..	..	..	..
With pellagra	11	33	44	4	12	16	7	7	14	7	7	14	21	..	1	..	..	..	..	2	2
With other somatic diseases ..	17	14	31	5	5	10	7	2	9	3	3	7	10	..	..	..	..	..	..	2	2
Manic-depressive	34	35	69	15	10	25	6	7	13	11	16	27	1	1	2	..	1	1	1	1	1
Dementia præcox	27	32	59	5	10	15	9	6	15	11	11	14	25	1	1	2	..	1	1	1	1
Epileptic psychoses	14	8	22	7	4	11	3	2	5	3	2	5	..	..	..	1	..	1	..	..	..
With mental deficiency	4	11	15	2	6	8	1	1	2	1	4	5	..	..	..	..	..	..	..	..	..
Undiagnosed psychoses	4	1	5	2	..	2	2	1	3	..	..	..	..	..	..	..	..	..	..	..	..
Without psychosis	15	13	28	11	9	20	2	1	3	2	3	5	..	..	..	..	..	..	..	..	..
TOTAL	174	170	344	70	71	141	38	25	63	51	66	117	6	2	8	1	2	3	8	4	12

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES

WHITE RACE

PSYCHOSES	Total			Urban			Rural		
	M	F	T	M	F	T	M	F	T
Senile	4	11	15	1	7	8	3	4	7
With cerebral arteriosclerosis	23	4	27	11	2	13	12	2	14
General paralysis	6	1	7	4	1	5	2	..	2
With cerebral syphilis	2	..	2	2	..	2	..	..	..
With brain tumor	1	..	1	..	..	..	1	..	1
With other brain or nervous diseases	4	2	6	2	..	2	2	2	4
Alcoholic	7	..	7	3	..	3	4	..	4
Due to drugs and other exogenous toxins	1	1	2	1	1	2	..	..	..
With pellagra	7	6	13	1	3	4	6	3	9
With other somatic diseases	10	12	22	4	6	10	6	6	12
Manic-depressive	46	41	87	26	14	40	20	27	47
Involution melancholia	4	8	12	2	4	6	2	4	6
Dementia præcox	22	31	53	10	16	26	12	15	27
Paranoia and paranoid conditions	4	11	15	4	9	13	..	5	2
Epileptic psychoses	10	10	20	2	5	7	8	5	13
Psychoneuroses and neuroses	12	18	30	12	17	29	7	6	13
With mental deficiency	5	5	10	2	4	6	3	3	6
Undiagnosed psychoses	8	6	14	2	4	6	2	2	4
Without psychosis	98	16	114	53	5	58	45	11	56
TOTAL	274	183	457	135	91	226	139	92	231

ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES

COLORED RACE

PSYCHOSES	Total			Urban			Rural		
	M	F	T	M	F	T	M	F	T
Senile	7	8	15	2	3	5	5	5	10
With cerebral arteriosclerosis	13	4	17	4	2	6	9	2	11
General paralysis	16	10	26	4	6	10	12	4	16
With cerebral syphilis	3	1	4	..	1	1	3	..	3
With other brain or nervous diseases	2	..	2	..	..	..	2	..	2
Alcoholic	7	..	7	1	..	1	6	..	6
With pellagra	11	33	44	4	8	12	7	25	32
With other somatic diseases	17	14	31	9	5	14	8	9	17
Manic-depressive	34	35	69	9	15	24	25	20	45
Dementia præcox	27	32	59	9	11	20	18	21	39
Epileptic psychoses	14	8	22	4	..	4	10	8	18
With mental deficiency	4	11	15	2	1	3	2	10	12
Undiagnosed psychoses	4	1	5	2	1	3	2	..	2
Without psychosis	15	13	28	6	2	8	9	11	20
TOTAL	174	170	344	56	55	111	118	115	233

**ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES**

WHITE RACE

PSYCHOSES	Total			Dependent			Marginal			Comfortable		
	M	F	T	M	F	T	M	F	T	M	F	T
Senile	4	11	15	2	9	11	1	2	3	1	..	1
With cerebral arteriosclerosis	23	4	27	6	4	10	14	..	14	3	..	3
General paralysis	6	1	7	1	1	2	5	..	5	..	..	..
With cerebral syphilis	2	..	2	..	..	..	2	..	2	..	..	..
With brain tumor	1	..	1	..	..	..	1	..	1	..	..	..
With other brain or nervous diseases	4	2	6	2	2	4	2	..	2	..	..	..
Alcoholic	7	..	7	..	..	..	7	..	7	..	..	..
Due to drugs and other exogenous toxins	1	1	2	..	1	1	..	..	1	..	..	1
With pellagra	7	6	13	2	6	8	5	..	5	..	..	..
With other somatic diseases	10	12	22	1	12	13	8	..	8	1	..	1
Manic-depressive	46	41	87	9	34	43	37	6	43	..	1	1
Involution melancholia	4	8	12	1	4	5	3	2	5	..	2	2
Dementia præcox	22	31	53	8	21	29	13	7	20	1	3	4
Paranoia and paranoid conditions	4	11	15	2	6	8	1	5	6	1	..	1
Epileptic psychoses	10	10	20	6	9	15	4	1	5	..	..	..
Psychoneuroses and neuroses	12	18	30	1	13	14	11	4	15	..	1	1
With mental deficiency	5	5	10	2	5	7	3	..	3	..	..	..
Undiagnosed psychoses	8	6	14	3	5	8	5	1	6	..	..	..
Without psychosis	98	16	114	38	16	54	53	..	53	7	..	7
TOTAL	274	183	457	84	148	232	175	28	203	15	7	22

**ECONOMIC CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES**

COLORED RACE

PSYCHOSES	Total			Dependent			Marginal			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T
Senile	7	8	15	2	5	7	3	1	4	2	2	4
With cerebral arteriosclerosis	13	4	17	2	1	3	10	3	13	1	..	1
General paralysis	16	10	26	2	5	7	8	5	13	6	..	6
With cerebral syphilis	3	1	4	..	1	1	3	..	3	..	..	..
With other brain or nervous diseases	2	..	2	..	..	..	2	..	2	..	..	..
Alcoholic	7	..	7	..	..	..	6	..	6	1	..	1
With pellagra	11	33	44	..	19	19	9	13	22	2	1	3
With other somatic diseases	17	14	31	2	9	11	13	5	18	2	..	2
Manic-depressive	34	35	69	3	19	22	23	16	39	8	..	8
Dementia præcox	27	32	59	4	15	19	18	17	35	6	..	5
Epileptic psychoses	14	8	22	3	4	7	6	4	10	5	..	5
With mental deficiency	4	11	15	2	7	9	2	4	6	..	..	..
Undiagnosed psychoses	4	1	5	..	..	..	4	1	5	..	..	..
Without psychosis	15	13	28	6	7	13	7	6	13	2	..	2
TOTAL	174	170	344	26	92	118	114	75	189	34	3	37

USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES
WHITE RACE

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	4	11	15	3	11	14	1	..	1	..	..	..	..	2	..
With cerebral arteriosclerosis	23	4	27	16	3	19	5	1	6	..	..	..	..	..	2
General paralysis	6	1	7	3	1	4	2	..	2	1	..	1	..	..	..
With cerebral syphilis	2	..	2	..	..	..	1	..	1	1	..	1	..	..	..
With brain tumor	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..
With other brain or nervous diseases	4	2	6	2	2	4	2	..	2	..	..	..	..	..	..
Alcoholic	7	..	7	..	..	..	..	..	..	7	..	7	..	..	..
Due to drugs and other exogenous toxins	1	1	2	..	1	1	..	..	..	1	..	1	..	..	..
With pellagra	7	6	13	6	6	12	1	..	1	..	..	..	..	..	..
With other somatic diseases	10	12	22	6	12	18	1	..	1	3	..	3	..	..	..
Manic-depressive	46	41	87	26	40	66	15	1	16	5	..	5	..	..	1
Involution melancholia	4	8	12	3	8	11	..	..	..	..	..	..	1	..	1
Dementia præcox	22	31	53	16	30	46	5	..	5	1	..	1	..	1	1
Paranoia and paranoid conditions	4	11	15	2	10	12	1	..	1	1	..	1	..	1	1
Epileptic psychoses	10	10	20	6	10	16	4	..	4	..	..	..	..	..	..
Psychoneuroses and neuroses	12	18	30	7	18	25	5	..	5	..	..	..	..	..	..
With mental deficiency	5	5	10	3	5	8	1	..	1	1	..	1	..	..	1
Undiagnosed psychoses	8	6	14	2	4	6	4	1	5	2	..	2	..	1	1
Without psychosis	98	16	114	15	12	27	19	3	22	64	1	65	..	..	..
TOTAL	274	183	457	116	173	289	68	6	74	87	1	88	3	3	6

USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES
COLORED RACE

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	7	8	15	6	8	14	1	..	1	..	..	..	..	..	..
With cerebral arteriosclerosis	13	4	17	7	4	11	5	..	5	..	..	..	1	..	1
General paralysis	16	10	26	14	10	24	2	..	2	..	..	..	..	..	..
With cerebral syphilis	3	1	4	2	1	3	1	..	1	..	..	..	..	..	..
With other brain or nervous diseases	2	..	2	2	..	2	..	..	..	..	..	..	..	..	..
Alcoholic	7	..	7	..	..	..	..	..	..	7	..	7	..	..	..
With pellagra	11	33	44	10	32	42	1	1	2	..	..	..	..	..	..
With other somatic diseases	17	14	31	12	13	25	4	1	5	..	..	..	1	..	1
Manic-depressive	34	35	69	27	34	61	5	..	5	1	1	2	1	..	1
Dementia præcox	27	32	59	24	30	54	3	1	4	..	1	1	..	..	..
Epileptic psychoses	14	8	22	13	8	21	1	..	1	..	..	..	..	..	..
With mental deficiency	4	11	15	4	11	15	..	..	..	..	..	..	..	..	..
Undiagnosed psychoses	4	1	5	4	1	5	..	..	..	..	..	..	..	..	..
Without psychosis	15	13	28	14	12	26	1	..	1	..	1	1	..	..	..
TOTAL	174	170	344	139	164	303	24	3	27	8	3	11	3	..	3

**MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES
WHITE RACE**

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	4	11	15	..	2	2	2	2	4	2	6	8	..	..	..	..	1	1	..	..	1
With cerebral arteriosclerosis ..	23	4	27	..	..	2	16	3	19	4	1	5	..	..	..	..	..	..	1	..	1
General paralysis	6	1	7	..	..	..	4	..	4	..	1	1	1	1	1	1	..	1	..	..	..
With cerebral syphilis	2	..	2	..	..	..	1	..	1	..	..	..	1	1	1	..	..	..	..	..	..
With brain tumor	1	..	1	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..
With other brain or nervous diseases	4	2	6	4	..	4	..	1	1	..	..	..	1	1	1	..	..	..	..	..	..
Alcoholic	7	..	7	5	..	5	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..
Due to drugs and other exogenous toxins	1	1	2	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..
With pellagra	7	6	13	4	1	5	3	2	5	..	..	..	..	3	3	..	..	..	..	..	..
With other somatic diseases ..	10	12	22	..	1	1	8	10	18	1	1	2	1	..	1	..	..	..	..	..	..
Manic-depressive	46	41	87	23	5	28	22	26	48	..	5	5	1	3	4	..	2	2	..	..	..
Involution melancholia	4	8	12	..	1	1	4	6	10	..	1	1	..	..	..	..	..	..	..	..	..
Dementia præcox	22	31	53	18	18	36	3	11	14	..	..	..	1	2	3	..	..	..	..	..	..
Paranoia and paranoid conditions	4	11	15	1	4	5	3	4	7	..	1	1	..	2	2	..	..	..	..	..	..
Epileptic psychoses	10	10	20	8	7	15	2	3	5	..	..	..	..	..	..	..	..	..	..	..	..
Psychoneuroses and neuroses ..	12	18	30	5	3	8	5	10	15	1	5	6	1	..	1	..	..	..	..	..	..
With mental deficiency	5	5	10	4	3	7	1	2	3	..	..	..	..	..	..	..	..	..	..	..	..
Undiagnosed psychoses	8	6	14	2	2	4	5	2	7	1	1	2	..	1	1	..	..	..	..	..	..
Without psychosis	98	16	114	39	7	46	56	8	64	2	..	2	7	1	8	4	..	4	..	..	..
TOTAL	274	183	457	115	54	169	138	91	229	11	22	33	14	13	27	5	3	8	1	..	1

**MARITAL CONDITION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE
TO PRINCIPAL PSYCHOSES
COLORED RACE**

PSYCHOSES	Total			Single			Married			Widowed			Separated			Divorced			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	7	8	15	..	1	1	6	1	7	1	4	5	..	..	..	..	..	..	2	2	2
With cerebral arteriosclerosis ..	13	4	17	2	..	2	11	2	13	..	2	2	..	3	3	1	4	1	..	..	1
General paralysis	16	10	26	5	2	7	7	3	10	..	3	3	3	1	4	1	..	1	..	1	1
With cerebral syphilis	3	1	4	..	..	..	2	1	3	1	..	1	..	..	..	..	..	..	..	..	..
With other brain or nervous diseases	2	..	2	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholic	7	..	7	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..
With pellagra	11	33	44	3	9	12	6	15	21	1	5	6	1	4	5	..	..	..	..	..	..
With other somatic diseases ..	17	14	31	2	2	4	8	4	12	4	5	9	2	3	4	..	..	..	..	..	..
Manic-depressive	34	35	69	19	8	27	12	19	31	1	2	3	2	6	8	..	..	..	..	..	..
Dementia præcox	27	32	59	15	9	24	8	15	23	..	3	3	4	5	9	..	..	..	..	..	..
Epileptic psychoses	14	8	22	10	6	16	3	1	4	1	1	2	..	..	..	..	..	..	..	..	..
With mental deficiency	4	11	15	3	6	9	1	3	4	..	2	2	..	..	..	..	..	..	..	..	..
Undiagnosed psychoses	4	1	5	2	..	2	2	1	3	..	..	..	..	..	..	..	..	..	..	..	..
Without psychosis	15	13	28	11	6	17	2	5	7	1	2	3	1	..	1	..	..	..	..	..	..
TOTAL	174	170	344	76	49	125	73	70	143	10	29	39	12	19	31	1	..	1	2	3	5

PSYCHOSES OF READMISSIONS

PSYCHOSES	White Males	White Females	Colored Males	Colored Females	Total
Senile psychoses .....	..	2	1	..	3
Psychoses with cerebral arteriosclerosis	2	1	1	..	4
General paralysis	2	..	1	..	3
Psychoses with cerebral syphilis	1	..	..	..	1
Psychoses with other brain or nervous diseases	2	1	1	..	4
Alcoholic psychoses	2	..	1	..	3
Psychoses due to drugs and other exogenous toxins	1	1	..	..	2
Psychoses with pellagra	3	2	3	4	12
Psychoses with other somatic diseases	6	1	2	1	10
Manic-depressive psychoses	22	26	15	13	76
Involution melancholia	1	2	..	..	3
Dementia præcox	17	24	6	18	65
Paranoia and paranoid conditions .....	..	5	..	..	5
Epileptic psychoses	9	7	3	2	21
Psychoneuroses and neuroses	6	9	..	..	15
Psychoses with mental deficiency	4	7	1	2	14
Undiagnosed psychoses	2	..	..	..	2
Without psychosis	20	4	..	..	24
TOTAL	100	92	35	40	267

DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES AND
CONDITION ON DISCHARGE

WHITE RACE

PSYCHOSES	Total			Recovered			Improved			Unimproved			Without Psychosis		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Traumatic	2	..	2	..	..	..	2	..	2	..	..	..	..	..	..
Senile	2	4	6	..	..	..	1	2	3	1	2	3	..	..	..
With cerebral arteriosclerosis	1	1	10	..	..	..	8	..	8	1	1	2	..	..	..
General paralysis	7	1	8	..	..	..	1	6	7	..	..	2	..	..	..
With cerebral syphilis	3	..	3	..	..	..	3	..	3	..	..	..	..	..	..
With other brain or nervous diseases	3	1	4	..	..	..	3	1	4	..	..	..	..	..	..
Alcoholic	11	..	11	7	..	7	3	..	3	1	..	1	..	..	..
Due to drugs and other exogenous toxins	4	..	4	2	..	2	2	..	2	..	..	..	..	..	..
With pellagra	13	22	35	1	13	14	11	8	19	1	1	2	..	..	..
With other somatic diseases	9	8	17	1	2	3	7	5	12	1	1	2	..	..	..
Manic-depressive	61	63	124	33	43	76	24	13	37	4	7	11	..	..	..
Involution melancholia	2	15	17	..	..	..	2	10	12	..	5	5	..	..	..
Dementia præcox	32	34	66	..	..	..	16	24	40	16	10	26	..	..	..
Paranoia and paranoid conditions	2	6	8	..	..	..	2	2	4	..	4	4	..	..	..
Epileptic psychoses	9	9	18	..	..	..	7	4	11	2	5	7	..	..	..
Psychoneuroses and neuroses	16	32	48	4	..	4	10	23	33	2	9	11	..	..	..
With psychopathic personality .....	..	1	1	..	..	..	..	..	..	..	1	1	..	..	..
With mental deficiency	4	11	15	1	1	2	3	10	13	..	..	..	..	..	..
Undiagnosed psychoses	5	1	6	..	..	..	1	1	2	4	..	4	..	..	..
Without psychosis	117	23	140	..	..	..	..	..	..	..	..	117	23	140	..
TOTAL	311	232	543	49	59	108	110	104	214	35	46	81	117	23	140

DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES AND
CONDITION ON DISCHARGE

COLORED RACE

PSYCHOSES	Total			Recovered			Improved			Unimproved			Without Psychosis		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile .....	..	1	1	..	..	..	..	1	1	..	..	..	..	..	..
With cerebral arteriosclerosis	5	..	5	..	..	..	5	..	5	..	..	..	..	..	..
General paralysis	3	2	5	..	..	..	3	2	5	..	..	..	..	..	..
With other brain or nervous diseases	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..
Alcoholic	2	..	2	..	..	..	2	..	2	..	..	..	..	..	..
With pellagra	7	17	24	3	11	14	4	6	10	..	..	..	..	..	..
With other somatic diseases	15	10	25	3	6	9	11	4	15	1	..	1	..	..	..
Manic-depressive	24	22	46	10	16	26	14	16	30	..	..	..	..	..	..
Dementia præcox	18	22	40	..	..	..	13	19	32	5	3	8	..	..	..
Epileptic psychoses	4	3	7	..	..	..	4	3	7	..	..	..	..	..	..
Psychoneuroses and neuroses .....	..	2	2	..	..	..	..	2	2	..	..	..	..	..	..
With mental deficiency	4	7	11	..	5	5	4	1	5	..	1	1	..	..	..
Undiagnosed psychoses	28	..	28	..	..	..	..	..	..	2	..	2	..	..	..
Without psychosis	7	8	15	..	..	..	..	..	..	..	..	..	7	8	15
TOTAL	92	104	196	16	38	54	61	54	115	8	4	12	7	8	15

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
WHITE RACE

CAUSES OF DEATH	Total			Senile			With cerebral arteriosclerosis			General paralysis			Alcoholic			Manic-depressive			Involution melancholia			Dementia praecox			Paranoia and paranoid conditions			Epileptic psychoses			Psychoneuroses and neuroses			With psychopathic personality			With mental deficiency			All other psychoses		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T			
Epidemic, Endemic & Infectious Diseases																																										
Influenza	..	1	1	1	1	1	1	
Lethargic encephalitis	..	1	1		
Tuberculosis of the respiratory system	5	1	6	1	..	1	2	1	3	2	..	2	
Purulent infection, septicæmia	..	1	1	1	1		
General Diseases Not Included in Class I																																										
Cancer and other malignant tumors	..	1	1	1	1		
Tumor (non-cancerous)	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	
Pellagra	2	3	5	2	2	2	1	..	3	..		
Diseases of the Nervous System																																										
Meningitis (non-epidemic)	..	1	1	1	1		
Cerebro spinal syphilis	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Cerebral hemorrhage, apoplexy	2	2	4	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	
General paralysis of the insane	2	1	3	2	1	3		
Epilepsy	4	1	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	1	4	..	..	..	..	..	..	..	..	..	..	1	..	1	
Chorea	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1		
Exhaustion from mental excitement	5	5	10	..	1	1	..	..	..	..	..	..	..	..	3	1	4	1	1	2	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	
Diseases of the Circulatory System																																										
Endocarditis and myocarditis	6	11	17	..	3	3	1	..	1	1	2	3	1	1	1	1	1	4	4	8	..	8		
Arteriosclerosis	19	5	24	2	3	5	9	1	10	2	1	3	1	..	1	5	..	5	..	5		
Other diseases of the circulatory system	2	2	4	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	1	..	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Diseases of the Respiratory System																																										
Bronchopneumonia	..	1	1	1	1		
Lobar pneumonia	3	1	4	..	1	1	2	..	2	1	..	1		
Non-Veneral Diseases of Genito-Urinary System and Annexa																																										
Nephritis	1	2	3	1	1	1	1	2	..	2		
Benign tumors of uterus	..	1	1	1	..	1	..	1		
Diseases of Bones and of the Organs of Locomotion	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

CAUSES OF DEATH OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
COLORED RACE

CAUSES OF DEATH	Total			Senile			With cerebral arteriosclerosis			General paralysis			Alcoholic			Manic-depressive			Involution melancholia			Dementia praecox			Paranoia and paranoid conditions			Epileptic psychoses			Psychoneuroses and neuroses			With psychopathic personality			With mental deficiency			All other psychoses		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T						
Epidemic, Endemic & Infectious Diseases																																										
Tuberculosis of the respiratory system	11	13	24	1	1	2	1	..	1	1	..	1	3	8	11	1	..	1	2	2	4	2	2	4	
Syphilis (non-nervous forms)	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1
General Diseases Not Included in Class I																																										
Cancer and other malignant tumors	..	1	1	1	1	1		
Tumor (non-cancerous)	1	..	1	1	1		
Pellagra	7	13	20	1	..	1	1	2	3	2	2	1	5	9	14		
Diseases of the Nervous System																																										
Meningitis (non-epidemic)	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral hemorrhage, apoplexy	..	1	1	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
General paralysis of the insane	21	10	31	21	10	31		
Epilepsy	8	4	12	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Exhaustion from mental excitement	4	7	11	..	1	1	..	..	..	..	..	..	..	..	..	..	3	6	9	..	..	..	..	..	..	7	2	9	..	..	..	..	..	1	1	1	1	1	2
Diseases of the Circulatory System																																										
Endocarditis and myocarditis	14	3	17	1	..	1	3	..	3	..	..	..	2	..	2	..	..	..	..	..	3	..	3	..	..	..	..	..	..	..	..	..	..	..	..	5	3	8	
Angina pectoris	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other diseases of the heart	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Arteriosclerosis	12	11	23	4	6	10	4	..	4	..	..	..	..	..	..	..	2	2	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	1
Other diseases of the circulatory system	6	2	8	1	..	1	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	3	2	5	5	
Diseases of the Respiratory System																																										
Bronchopneumonia	1	..	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	2	1	3	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2	
Lobar pneumonia	4	2	6	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	2	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diseases of the Digestive System																																										
Ulcerative colitis	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Non-Venereal Diseases of Genito-Urinary System and Annexa																																										
Nephritis	6	2	8	..	..	..	1	2	3	..	..	..	..	..	..	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	..	3
External Causes																																										
Accidental burns	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
Total	98	73	171	8	7	15	12	5	17	22	10	32	2	..	2	7	10	17	12	14	26	8	3	11	3	4	7	24	20	44	

AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

WHITE RACE

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over			Unascertained			
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T				
Senile	2	8	10	
With cerebral arteriosclerosis	12	3	15	1	1	2	2	2	4	4	
General paralysis	2	1	3	1	..	1	..	1	1	1	..	1	
With cerebral syphilis	1	..	1	1	..	1
With Huntington's chorea	1	..	1	1	..	1
With other brain or nervous diseases	1	1	2	1	1	1	1
Alcoholic	1	..	1	1	1
Due to drugs and other exogenous toxins	1	1	2	1	1	1	1	..	1
With pellagra	2	2	4	1	..	1	1	1	..	1	1	1
With other somatic diseases	11	5	16	1	..	1	..	1	1	2	3	1	1	2	..	3	3	1	1	..	1	3	2	5	1	..	1		
Manic-depressive	8	4	12	1	..	1	1	..	1	1	..	1	1	1	1	..	1	2	1	3	2	..	2	1	1	..	1	1	..	1	1	
Involution melancholia	1	1	2	1	1	2	1	1	1	..	1	1	2	3	5	
Dementia præcox	7	8	15	1	1	1	..	1	1	1	1	2	1	1	2	1	..	1	..	1	1	..	1	1	1	1	2	3	5	
Paranoia and paranoid condition	1	1	2	2	1	1	1	1
Epileptic psychoses	4	2	6	2	..	2	1	1	1	1	2	1	..	1
Psychoneuroses and neuroses	2	2	1	1	1	1
With mental deficiency	1	1	1	1
Undiagnosed psychoses	2	2	1	1	1	1
Without psychosis	4	1	5	1	..	1	1	1	1	..	1	1	..	1	1	1
Total	58	43	101	2	..	2	2	1	3	3	3	6	4	3	7	3	..	3	5	4	9	5	7	12	5	3	8	11	4	15	5	3	8	6	6	12	7	9	16	

AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
COLORED RACE

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years			25-29 years			30-34 years			35-39 years			40-44 years			45-49 years			50-54 years			55-59 years			60-64 years			65-69 years			70 years and over			Unascertained		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T						
Senile	8	7	15	1	1	1	1	..	1	2	1	3	1	3	4	4	2	6	
With cerebral arteriosclerosis	12	5	17	1	1	2	3	4	4	1	1	2	1	3	4	1	..	5	2	..	1	1	2	3	4	1		
General paralysis	22	10	32	1	..	1	1	1	2	2	..	2	3	2	4	4	4	4	1	5	3	3	3	6	2	..	2	1	1	2	2	1	..	1	
With cerebral syphilis	1	..	1	1	..	1	
With other brain or nervous diseases	1	1	2	1	1	1	
Alcoholic	2	..	2	1	..	1	1	1	
With pellagra	5	11	16	3	3	..	2	2	..	1	1	1	2	2	2	1	3	..	1	1	1	1	1	2	1	1	
With other somatic diseases	13	5	18	1	1	1	1	1	1	2	1	3	2	..	2	4	2	6	1	..	1		
Manic-depressive	7	10	17	1	1	1	1	2	3	1	1	1	2	1	3	..	1	1	2	2	1	1	1	1	1	1	1	2	2	2	
Dementia præcox	12	14	26	2	2	1	2	3	1	5	6	2	1	3	3	..	3	1	1	2	1	3	4	..	2	2	1	1
Epileptic psychoses	8	3	11	1	1	2	..	2	2	2	2	1	1	2	1	1	2	1	3	1	1
With mental deficiency	3	4	7	1	1	2	1	..	1	..	1	1	2	1	1
Without psychosis	4	3	7	1	1	2	2	..	2	1	1	1	1	1	2	..	1	1	..	1
Total	98	73	171	3	8	11	7	7	14	7	9	16	11	8	19	9	8	17	10	7	17	10	6	16	12	6	18	11	2	13	8	4	12	3	4	7	7	4	11

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL CLASSIFIED ACCORDING TO PRINCIPAL PSYCHOSES
WHITE RACE

PSYCHOSES	Total			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over			
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T				
Senile	2	8	10	..	1	1	1	2	3	..	1	1	1	1	..	1	2	3	2	2		
With cerebral arteriosclerosis	12	3	15	4	1	5	3	..	3	1	..	1	1	1	1	..	2	3	3	2	2		
General paralysis	2	1	3	1	..	1	1	..	1	..	1	1	1		
With cerebral syphilis	1	..	1	1	..	1		
With Huntington's chorea	1	..	1	1	..	1		
With other brain or nervous diseases ..	1	1	2	1	..	1	1	1		
Alcoholic	1	..	1	1	..	1	..	1		
Due to drugs and other exogenous toxins	1	1	2	1	1	..	1	1	1	..	1		
With pellagra	2	2	4	1	2	..	2	1	1	1	..	1	1	1		
With other somatic diseases	11	5	16	1	2	3	1	1	2	7	1	8	1	1	2	..	4	1	1	..	1	..	1	1	1		
Manic-depressive	8	4	12	1	1	2	1	1	2	1	..	1	4	..	4	1	..	1	1	1	..	1	1		
Involution melancholia	1	1	2	1	1	1	1	..	1	..	1	
Dementia præcox	7	8	15	1	1	2	1	1	2	2	2	2	2	1	3	..	1	1	..	2	2	1	1	2	1	1	..	2	
Paranoia and paranoid condition	1	1	1	1	1	1	1	
Epileptic psychoses	4	2	6	2	..	2	..	1	1	1	..	1	1	1	1	..	1		
Psychoneuroses and neuroses	2	2	1	1	1	1	
With mental deficiency	1	1	1	1	
Undiagnosed psychoses	2	2	..	1	1	..	1	1	1	1	
Without psychosis	4	1	5	3	..	3	1	..	1	1	..	1	
Total	58	43	101	11	7	18	11	7	18	9	2	11	2	1	3	12	6	18	1	6	7	2	1	3	4	2	6	3	1	4	..	3	3	..	3	3	2	2	4	1	2	3	..

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL CLASSIFIED ACCORDING TO PRINCIPAL PSYCHOSES

COLORED RACE

PSYCHOSES	Total			Less than 1 month			1-3 months			4-7 months			8-12 months			1-2 years			3-4 years			5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Senile	8	7	15	2	1	3	2	1	3	1	..	1	1	1	2	2	4	1	1	1	1
With cerebral arteriosclerosis	12	5	17	1	..	1	2	1	3	2	..	2	1	..	1	4	3	7	1	1	2	1	1
General paralysis	22	10	32	3	1	4	2	4	6	1	3	4	8	1	9	4	1	5	2	..	1	1	..	1
With cerebral syphilis	1	1	2	1	1	1	..	1
With other brain or nervous diseases ..	1	1	2	1	1	1	..	1
Alcoholic	2	1	3	1	..	1	..	1
With pellagra	5	11	16	4	3	7	..	4	4	1	3	4	..	1	1
With other somatic diseases	13	5	18	1	1	2	1	2	3	2	..	2	1	1	2	4	1	5	3	..	3	1	..	1	1	..	1	2	..	2	..
Manic-depressive	7	10	17	1	5	6	..	2	2	1	..	1	..	1	1	3	..	3	1	..	1
Dementia praecox	12	14	26	1	1	2	1	3	..	1	1	5	3	8	..	4	4	1	1	2	..	1	1	1	1	1	1	2	2	..	3	..	3	..	3	..
Epileptic psychoses	8	3	11	1	..	1	2	1	3	..	1	1	1	1	1	..	1	..	1	1	1	..	1	1	1
With mental deficiency	3	4	7	1	..	1	1	1	2	..	2	2	1	..	1	..	1	1	..	1	..
Without psychosis	4	3	7	1	1	3	1	4	1	..	1	1	1
Total	98	73	171	13	11	24	10	16	26	10	7	17	12	5	17	25	15	40	11	8	19	3	..	3	3	2	5	3	2	5	2	1	3	2	3	5	1	..	1	3	3	6

AGES AND DURATION IN HOSPITAL OF THOSE DYING OF PELLAGRA

	Total					15-19 years					20-24 years					25-29 years					30-34 years					35-39 years				
	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total
Less than one month	1	4	3	8	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	2
1-3 months	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..
4-7 months	1	1	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1	..	..	..	1	..	..	..	..	..
8-12 months	1	1	2	..	..	..	..	..	..	..	..	..	1	1	..	..	..	1	1	..	..	..	1	..	..	..	..	..
1-2 years	1	1	..	..	..	..
15-19 years	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	2	3	7	13	25	..	..	..	4	4	..	1	..	2	3	..	..	..	2	2	1	..	..	3	4	..	..	2	..	2

AGES AND DURATION IN HOSPITAL OF THOSE DYING OF PELLAGRA—Continued

	40-44 years					45-49 years					50-54 years					55-59 years					60-64 years				
	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total	W. M.	W. F.	C. M.	C. F.	Total
Less than one month	1	1	..	1	..	..	1	..	1	1	1	3	1	..	..	..	..	..	..	..	1	1
1-3 months	1	..	..	..	1	3	..	..	..	..	..	..	..	..	..	..
4-7 months	1	..	1	..	..	1	1	3	..	..	..	..	..	..	..	1	..	..
8-12 months	1	..	..	1	..	..	..	..	..
1-2 years	1	..	..	1	..	..	..	..	..	..	..	..	..	..
15-19 years	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Total	1	1	..	1	1	..	2	1	1	2	1	5	..	..	1	..	1	..	..	1	..	1

COMPARISON OF DEATHS FROM PELLAGRA WITH OTHER CAUSES

White Males					White Females					Total White					Colored Males					Colored Females					Total Colored					Total White and Colored					
Cause of Death			Relative Per Cent		Cause of Death			Relative Per Cent		Cause of Death			Relative Per Cent		Cause of Death			Relative Per Cent		Cause of Death			Relative Per Cent		Cause of Death			Relative Per Cent		Cause of Death			Relative Per Cent		
Total	Pellagra	All Other Causes	100 Pc.		Total	Pellagra	All Other Causes	100 Pc.		Total	Pellagra	All Other Causes	100 Pc.		Total	Pellagra	All Other Causes	100 Pc.		Total	Pellagra	All Other Causes	100 Pc.		Total	Pellagra	All Other Causes	100 Pc.		Total	Pellagra	All Other Causes	100 Pc.		
			Pellagra	All Other Causes				Pellagra	All Other Causes				Pellagra	All Other Causes				Pellagra	All Other Causes				Pellagra	All Other Causes				Pellagra	All Other Causes				Pellagra	All Other Causes	Pellagra	All Other Causes
5	...	5	...	...	5	...	...	...	...	8	...	...	...	...	9	4	1	8	...	...	7	1	6	...	...	16	2	14	...	...	24	2	22	...	...
5	...	5	...	...	5	...	...	...	...	8	...	...	...	...	4	...	...	4	...	...	11	...	...	...	...	15	...	13	...	...	23	...	...	...	...
5	...	5	...	...	5	...	...	...	...	8	...	...	...	...	15	...	...	13	...	...	6	...	...	...	...	21	...	19	...	...	27	...	...	...	...
7	1	6	...	...	7	...	...	...	...	12	1	11	...	...	10	...	...	8	...	...	7	1	6	...	...	17	...	14	...	...	29	...	...	...	...
3	...	3	...	...	3	...	...	...	...	6	...	6	...	...	8	...	...	2	...	...	2	...	...	...	...	10	...	10	...	...	16	...	...	...	...
6	...	6	...	...	6	...	...	...	...	11	...	11	...	...	15	...	...	15	...	...	2	...	...	...	...	20	...	19	...	...	31	...	...	...	...
4	...	4	...	...	4	...	...	...	...	6	1	5	...	...	7	...	...	7	...	...	7	4	3	...	...	14	...	10	...	...	20	...	...	...	...
6	...	6	...	...	6	...	...	...	...	9	...	9	...	...	7	...	...	4	...	...	3	...	...	...	...	10	...	9	...	...	19	...	...	...	...
9	1	8	...	...	9	...	...	...	...	13	1	12	...	...	5	...	...	5	...	...	9	2	7	...	...	14	...	12	...	...	27	...	...	...	...
1	...	1	...	...	1	...	...	...	...	7	1	6	...	...	9	...	...	7	...	...	4	1	3	...	...	13	...	10	...	...	20	...	...	...	...
4	...	4	...	...	4	...	...	...	...	7	...	7	...	...	6	...	...	6	...	...	7	...	...	...	...	13	...	13	...	...	20	...	...	...	...
5	...	5	...	...	5	...	...	...	...	8	...	8	...	...	3	...	...	3	...	...	5	...	...	...	...	8	...	8	...	...	16	...	...	...	...
58	2	56	3.45	96.55	43	3	40	6.97	93.03	101	5	96	4.95	95.05	98	7	91	7.14	92.86	73	13	60	17.8	82.2	171	20	151	17.5	82.5	272	25	247	9.2	90.80	

RESULTS OF PELLAGRINS ADMITTED

	White Males	White Females	Total White	Colored Males	Colored Females	Total Colored	Total White and Colored
Dead	5	12	17	7	11	18	25
Discharged	10	12	22	4	1	5	17
Out on parole	8	10	18	2	10	12	30
Still in hospital	12	14	26	8	23	31	57
TOTAL	35	28	63	21	45	66	129

OCCUPATIONS AND DAILY AVERAGE NUMBER OF PATIENTS OCCUPIED

	White Males	White Females	Colored Males	Colored Females	Total
Bakery	12	..	..	..	12
Barbershop	1	..	..	..	1
Broom making	1	..	..	..	1
Carbolizing detail	4	..	..	..	4
Cleaning walls	5	..	..	..	5
Coal pile	22	..	10	..	32
Dairy	1	..	8	..	9
Dental office	1	..	..	..	1
Dining room	76	83	30	73	262
Fancy work .....	..	22	..	..	22
Farm	31	..	105	..	136
Firemen .....	..	..	3	..	3
Fish detail	6	..	..	..	6
Florist	2	..	..	..	2
Garbage	6	..	4	..	10
Garden, vegetable	4	..	..	..	4
Hog feeders .....	..	..	4	..	4
Kitchen	18	..	30	18	66
Laboratory	1	..	..	..	1
Laundry	1	..	10	65	76
Mattress making	6	..	..	..	6
Musicians	11	..	..	..	11
Offices and halls	2	..	2	..	4
Printers	3	..	..	..	3
Scrubbers	7	..	20	..	27
Sewer cleaners	2	..	2	..	4
Sewing on ward	1	..	..	..	1
Sewing room	1	..	5	50	104
Stairways	6	..	4	..	10
Storeroom	10	..	..	..	10
Trucks and wagons .....	..	..	8	..	8
Vegetable house .....	..	19	..	34	53
Ward work	82	125	24	146	377
Weaving	1	..	..	..	1
Wood yard and cutting	3	..	15	..	18
Yard detail	16	..	15	64	95
TOTAL	343	297	299	450	1389

RESIDENCE OF PATIENTS RECEIVED FROM OCTOBER 1, 1931 THROUGH SEPTEMBER 1932

Counties	White Males	Colored Males	White Females	Colored Females	Total
Abbeville	4	4	3	7	18
Aiken	6	9	8	8	31
Allendale	7	5	..	1	13
Anderson	24	4	17	9	54
Bamberg	4	1	4	..	9
Barnwell	2	7	2	4	15
Beaufort	1	4	..	4	9
Berkeley	3	4	1	3	11
Calhoun	1	6	1	6	14
Charleston	9	8	4	8	29
Cherokee	12	1	7	2	22
Chester	4	4	5	4	17
Chesterfield	12	1	9	2	24
Clarendon	2	3	2	8	15
Colleton	3	3	3	3	12
Darlington	9	7	6	7	29
Dillon	7	..	2	..	9
Dorchester	2	2	2	2	8
Edgefield .....	..	2	1	5	8
Fairfield	5	4	4	2	15
Florence	13	6	11	7	37
Georgetown	4	9	..	6	19
Greenville	38	7	25	11	81
Greenwood	9	4	10	3	26
Hampton	1	3	1	3	8
Horry	4	2	5	1	12
Jasper .....	..	2	2	2	6
Kershaw	6	4	4	4	18
Lancaster	12	..	7	3	22
Laurens	10	9	9	7	35
Lee	7	4	5	4	20
Lexington	12	4	6	..	22
Marion	1	5	4	2	12
Marlboro	3	2	2	3	10
McCormick	2	3	..	1	6
Newberry	4	3	6	2	15
Oconee	9	2	7	4	22
Orangeburg	10	8	13	10	41
Pickens	9	3	4	1	17
Richland	33	16	20	16	85
Saluda	5	3	2	..	10
Spartanburg	35	9	24	9	77
Sumter	8	9	10	13	40
Union	7	2	10	1	20
Williamsburg	3	5	2	5	15
York	12	6	5	7	30
TOTAL	374	209	275	210	1068

RESIDENCE OF PATIENTS PRESENT SEPTEMBER 30, 1932

Counties	White Males	Colored Males	White Females	Colored Females	Total
Abbeville	13	13	17	15	58
Aiken	31	29	31	25	116
Allendale	13	12	4	4	33
Anderson	57	29	66	30	182
Bamberg	5	7	5	18	35
Barnwell	8	20	4	18	50
Beaufort	2	15	5	9	31
Berkeley	3	16	14	9	42
Calhoun	8	16	3	12	39
Charleston	51	64	51	74	240
Cherokee	13	7	22	7	49
Chester	24	20	17	23	84
Chesterfield	20	9	20	12	61
Clarendon	9	15	13	23	60
Colleton	21	16	12	16	65
Darlington	15	22	21	17	75
Dillon	12	4	15	7	38
Dorchester	4	9	8	16	37
Edgefield	4	14	7	12	37
Fairfield	3	14	6	11	34
Florence	26	29	27	38	120
Georgetown	5	18	5	22	50
Greenville	60	30	71	22	183
Greenwood	20	23	22	19	84
Hampton	1	9	9	10	29
Horry	15	7	14	8	44
Jasper	2	7	2	7	18
Kershaw	17	15	12	21	65
Lancaster	13	7	18	7	45
Laurens	28	24	24	10	86
Lee	7	7	10	8	32
Lexington	17	7	24	10	58
Marion	7	13	17	13	50
Marlboro	4	15	19	23	61
McCormick .....	..	8	2	4	14
Newberry	9	13	14	11	47
Oconee	20	9	24	5	58
Orangeburg	12	31	30	35	108
Pickens	24	4	20	7	55
Richland	61	56	69	61	247
Saluda	4	5	10	5	24
Spartanburg	78	32	77	38	225
Sumter	18	27	14	35	94
Union	16	11	24	7	58
Williamsburg	10	24	5	20	59
York	26	17	28	27	98
TOTAL	816	799	932	831	3378

TREASURER'S REPORT

Columbia, S. C., Oct. 1, 1932.

Dr. C. F. Williams, Superintendent, South Carolina State Hospital, Columbia, S. C.

Dear Sir: The financial report for 1931-'32 is herewith respectfully submitted.

From our appropriation for 1932, viz: \$800,000.00 plus our fees, it is estimated that we would have been able to leave in the State Treasury on December 31, 1932, all our fees plus \$24,237.18 from the appropriation—a total of \$39,427.00—had it not been for the cut of 15%—\$120,000.00—announced in the Comptroller General's letter to us of June 7, 1932. This cut will leave us, on the 23rd of November, with no money whatever except the Revolving Fund, which is provided to pay for farm produce, C. O. D. shipments, freights, et cetera.

COST OF OPERATION

Income for the twelve months ended September 30, 1932, is as follows:

From paying patients	\$13,686.24
From dairies and farms	386.03
From Diversional Occupation Department	220.46
From sundry sources	669.25
	<hr/>
	\$14,961.98

The expenditure for maintenance is \$825,480.63.

The daily average population is 3313 and daily per capita cost .6805.

BUDGET FOR 1933

The Budget Request for 1933 is for the sum of \$925,000.00. Of that amount, \$800,000.00 is for maintenance and \$125,000.00 for new buildings.

The amount requested for maintenance is based on a daily per capita cost of .6287, a population of 3,486 and the present price of supplies.

If it were not for the additional insurance premium of \$4,500.00 made necessary by the reduction of the State Sinking Fund below the million dollar mark, our request would have been based on a daily per capita cost of .62517.

FARM OPERATIONS

Again, a third consecutive year, we had a serious summer drought to contend with.

The winter-growing crops and the late-maturing silage-cane crops were normal, but the summer-growing crops, especially corn, were seriously damaged, although the barren cornstalks have made excellent silage in the pit-silo we dug to meet this emergency.

Yields are from 30% to 60% below normal.

The total gain from the dairy and farm operations is \$6,764.12.

Yours respectfully,

H. T. PATTERSON,
Treasurer.

GENERAL INFORMATION

(Data correct at end of report year, September 30, 1932)

1. Date of opening as a hospital for mental diseases December 18, 1827.	
2. Type of hospital: State.	
3. Hospital plant:	
Value of hospital property:	
Real estate, including buildings	\$2,767,102.44
Personal property	257,313.40
Total	\$3,024,415.84
Total acreage of hospital property owned	2,731.67
(Includes grounds, farms, gardens and sites occupied by buildings)	
Additional acreage rented (woods for shade)	3
Total acreage under cultivation during previous year ..	977.48
(Includes land owned and rented)	

4. OFFICERS AND EMPLOYEES

	Actually in Service at End of Year			Vacancies at End of Year		
	M.	F.	T.	M.	F.	T.
Superintendents	1	..	1	..	..	..
Assistant physicians	14	1	15	..	..	..
Medical internes .....	..	..	..	2	..	2
Clinical assistants .....	..	..	..	..	..	..
Total physicians	15	1	16	2	..	2
Stewards	2	..	2	..	..	..
Resident dentists	1	..	1	..	..	..
Pharmacists	1	..	1	..	..	..
Graduate nurses .....	..	33	33	..	..	..
Other nurses and attendants	141	150	291	..	..	..
Occupational therapists	2	5	7	..	..	..
Social workers .....	..	2	2	..	..	..
All other officers and employees	184	46	230	..	..	..
Total officers and employees	346	237	583	2	..	2
			M.		F.	T.
6-7. Patients under treatment in occupational-therapy classes, including physical training, on date of report and other patients employed in general work on date of report			642		747	1389
8. Average daily number of all patients actually in hospital during year			1,587		1,722	3,309
9. Voluntary patients admitted during year			25		10	35
10. Persons given advice or treatment in out-patient clinics during year			304		254	558

FINANCIAL STATEMENT FOR THE REPORT
YEAR ENDED SEPTEMBER 30, 1932

Receipts

Revolving fund from previous report year	\$ 35,000.00
Balance fees in hand of State Treasurer October 1, 1931, (To be used for permanent improvement)	11,442.06
Received from appropriation	868,063.10
Received from paying patients	13,686.24
Received from all other sources	1,275.74
Total Receipts	\$929,467.14

Disbursements

1. Expenditures for maintenance of patients:	
Salaries and wages	\$334,054.16
Provisions (food)	235,473.45
Fuel (gas, kerosene, coal and freight on coal)	21,403.84
All other expenditures for maintenance	234,549.18
Total expenditures for maintenance	\$825,480.63
2. Expenditures for all purposes other than maintenance, including new buildings, other additions and permanent betterments	56,749.44
Total expenditures	\$882,230.07
Balance fees in hand of State Treasurer, September 30, 1932	\$12,237.07
Revolving fund on hand at close of report year	35,000.00
Total disbursements, including balance on hand	\$929,467.14

Receipts

Revolving fund from 1931	\$ 35,000.00
Balance fees in hand of State Treasurer, October 1, 1932, (To be used for permanent improvement)	11,442.06
From paying patients	13,686.24
From dairy and farms	386.03
From Diversional Occupation Department	220.46
From sundry sources	669.25
From 1931-1932 appropriation:	
Maintenance	\$772,562.74
Dairy	27,261.10
Columbia Farm	8,766.01
Moore Farm	5,485.72

Pel Farm	11,405.06
Permanent improvement	42,582.47
Total Receipts	<u>\$929,467.14</u>

Disbursements

Paid for following activities:

Maintenance	\$772,562.74
Dairy	27,261.10
Columbia Farm	8,766.01
Moore Farm	5,485.72
Pel Farm	11,405.06
Permanent improvement	56,749.44
Balance fees in hand of State Treasurer, September 30, 1932	12,237.07
Revolving fund	<u>35,000.00</u>
Total Disbursements, including balance on hand	\$929,467.14

DAIRY REPORT 1931-'32

Credits

Animals caught in fields	\$ 7.25
Animals sold	943.99
Beef, 5,291 pounds @ .10	529.10
Compost	225.25
Feed sold	905.66
Hides and tallow	24.53
Milk, 154,258.13 gallons @ .25 to Hospital	38,564.53
Refunds	84.23
Sacks (empty)	276.05
Seeds and plants sold	18.60
Service fees	2.00
Shucks	10.13
Pure bred cattle on hand September 30, 1932	15,990.00
Grade cattle on hand September 30, 1932	5,445.00
Work animals (6) on hand September 30, 1932	745.00
Dairy and farm implements on hand September 30, 1932 ..	1,676.42
Fertilizer on hand September 30, 1932	68.24
Feed on hand September 30, 1932	<u>8,591.09</u>
	\$ 74,107.07

DAIRY REPORT 1931-'32

Debits

Pure bred cattle on hand October 1, 1931	\$ 14,275.00
Grade cattle on hand October 1, 1931	6,360.00
Work animals (6) on hand October 1, 1931	890.00

Dairy and farm implements on hand October 1, 1931	1,571.93
Fertilizer on hand October 1, 1931	36.53
Feed on hand October 1, 1931	8,078.43
Agricultural and botanical supplies	663.71
Animals purchased	300.00
Bedding	63.71
Board of attendants and laborers	1,936.80
Depreciation of plant	675.25
Equipment	230.78
Feed	16,428.66
Freight and express	1,706.11
Hauling, etc.	857.44
Horse shoeing	42.95
Insurance on buildings and livestock	636.79
Interest on amount invested in cattle	480.00
Kerosene, gasoline and oil	120.60
Materials for repairs to equipment, etc.	438.48
Milk cans, hose, cotton discs, brushes, cheese cloth, etc.	242.61
Office supplies	18.37
Pasture	375.75
Pay roll	7,496.05
Plowing (tractor)	202.25
Registration fees	36.50
Rent of land (102.48 acres @ \$4.00)	409.92
Seeds and plants	247.37
Slaughtering	27.00
Testing cows for advanced registry	233.37
Veterinarian and veterinary supplies	61.10
Balance in favor of Dairy	8,963.61

\$ 74,107.07

COLUMBIA FARM REPORT 1931-'32

Credits

Animals caught in fields	\$ 0.50
Beans (string), 234.1 bushels @ .75	175.58
Beets, 238.02 bushels @ \$1.00	238.02
Cabbage, 15,703 pounds @ .015	235.55
Cane seed	3.38
Carrots, 180.6 bushels @ \$1.00	180.60
Collards, 1,488 pounds @ .015	22.32
Compost	1,247.89
Corn (ear), 70.25 bushels @ .50	35.13
Corn (shelled), 148.4 bushels @ .50	74.20
Corn (roasting ear), 1,301.5 dozen @ .15	195.23
Cucumbers, 84.5 bushels @ .70	59.15
Ensilage, 600 tons @ \$4.50	2,700.00
Feed sold	2.71

Hay	915.88
Hogs sold	55.65
Lettuce, 559.3 dozen @ .30	167.79
Oats, 10 bushels @ .50	5.00
Okra, 546.6 bushels @ \$1.00	546.60
Onions (spring), 1,329 bushels @ .85	1,129.65
Onions (dry), 405 bushels @ .85	344.25
Peas (green, field), 28.9 bushels @ .40	11.56
Pepper, 66.6 bushels @ .75	49.95
Plants and seeds sold	6.76
Pork, 65,322 pounds @ .09	5,878.98
Potatoes (Irish), 481.75 bushels @ .90	433.58
Prizes	8.00
Refunds	10.01
Sacks (empty)	134.96
Salad, 665 bushels @ .40	266.00
Shucks	51.75
Slaughtering	47.00
Spinach, 41.6 bushels @ .80	33.28
Squash, 447.9 bushels @ .75	335.93
Tomatoes, 121.14 bushels @ .75	90.86
Turnips, 225.24 bushels @ .90	202.72
Implements and machinery on hand September 30, 1932	1,137.90
Fertilizer on hand September 30, 1932	172.61
Hogs on hand September 30, 1932	3,476.00
Work animals (11) on hand September 30, 1932	1,565.00
Feed and seed on hand September 30, 1932	2,165.00
Debit balance	2,831.97
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\$ 27,228.10	

The loss shown on this unit this year is the result of the summer drought. For the last four years the Columbia Farm shows an average gain of \$2,899.36.

COLUMBIA FARM REPORT 1931-'32

Debits

Implements and machinery on hand October 1, 1931	\$ 1,082.10
Fertilizer on hand October 1, 1931	108.21
Hogs on hand October 1, 1931	4,774.00
Work animals (10) on hand October 1, 1931	1,600.00
Feed and seed on hand October 1, 1931	5,552.00
Agricultural and botanical supplies	963.85
Bedding	757.03
Board of attendants and laborers	1,453.63
Depreciation on buildings	500.00
Equipment	199.16
Freight and express	149.51

Garbage	1,453.45
Hauling	170.51
Horse shoeing	47.08
Insurance on buildings and livestock	366.93
Interest on amount invested in hogs	36.00
Kerosene, gasoline and oil	130.10
Materials for repairs to equipment, etc.	454.20
Rope, twine, axle grease, cans, brushes, etc.	160.18
Office supplies	8.50
Pay roll	5,869.53
Plowing (tractor)	237.50
Rent of land (154.02 acres @ \$4.00)	616.08
Seeds and plants	235.56
Veterinarian and veterinary supplies	152.99
Work animals	150.00
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	\$ 27,228.10

MOORE FARM REPORT 1931-'32

Credits

Beans (string), 125 bushels @ .75	\$ 93.75
Beans (butter, in hull), 76 bushels @ \$1.00	76.00
Beets, 32 bushels @ \$1.00	32.00
Cabbage, 17,915 pounds @ .015	268.73
Cantaloupes, 355 dozen @ .40	142.00
Collards, 1,000 pounds @ .015	15.00
Corn (roasting ear), 816 dozen @ .15	122.40
Corn (shelled), 2,534.28 bushels @ .50	1,267.14
Cucumbers, 58 bushels @ .70	40.60
Hauling	565.25
Hay	655.73
Hogs sold	145.00
Oats, 331 bushels @ .50	165.50
Okra, 160.5 bushels @ \$1.00	160.50
Onions (spring), 236 bushels @ .85	200.60
Pasture	362.00
Peas (dry, field), 393.9 bushels @ \$1.25	492.38
Peas (English), 8 bushels @ \$1.00	8.00
Peas (green, field), 304 bushels @ .40	121.60
Pea hulls	29.52
Plants and seeds sold	6.00
Potatoes (Irish), 209 bushels @ .90	187.20
Potatoes (sweet), 1,719 bushels @ .75	1,289.25
Radishes, 27 bushels @ .65	17.55
Refunds	12.22
Salad, 724 bushels @ .40	289.60
Shucks	56.71
Squash, 161.5 bushels @ .75	121.13

Tomatoes, 308 bushels @ .75	231.00
Turnips, 923.26 bushels @ .50 and .90	763.26
Watermelons, 3,708 @ .10	370.80
Implements and machinery on hand September 30, 1932 ..	1,765.20
Work animals (16) on hand September 30, 1932	2,167.50
Hogs on hand September 30, 1932	335.50
Feed and seed on hand September 30, 1932	873.00
Fertilizer on hand September 30, 1932	57.45

\$ 13,507.07

MOORE FARM REPORT 1931-'32

Debits

Implements and machinery on hand October 1, 1931	\$ 1,607.70
Work animals (16) on hand October 1, 1931	2,010.00
Hogs on hand October 1, 1931	560.00
Feed and seed on hand October 1, 1931	1,725.50
Agricultural and botanical supplies	1,511.48
Board of attendants	360.00
Compost	77.40
Depreciation of plant	488.00
Equipment	281.08
Feed	114.15
Freight and express	8.92
Garbage	11.79
Hauling	2.97
Horse shoeing	66.20
Insurance on buildings and livestock	92.33
Materials for repairs to equipment, etc.	257.70
Miscellaneous supplies	75.25
Pay roll	3,233.00
Plowing	91.50
Rent of land (371 acres @ \$2.00)	742.00
Seeds and plants	186.17
Balance in favor of Moore Farm	3.93

\$ 13,507.07

The small gain shown on this unit this year is the result of the summer drought. For the last five years, including this one, the Moore Farm shows an average gain of \$2,486.41.

PEL FARM REPORT 1931-'32

Credits

Animals caught in fields	\$ 7.50
Beef, 5,551 pounds @ .10	555.10
Cantaloupes, 1,217 dozen @ .40	486.80

Compost	720.80
Corn (shelled), 613.39 bushels @ .50	306.70
Feeding Hospital team (3 head)	375.00
Hauling, etc.	597.00
Hides and tallow	23.42
Hogs sold	15.00
Milk, 43,976.5 gallons @ .25 to Hospital	10,994.13
Peaches, 80 bushels @ .75	60.00
Pork, 18,122+ pounds @ .09	1,631.00
Potatoes (Irish), 1,079 bushels @ .90	971.10
Potatoes (sweet), 1,060 bushels @ .75	795.00
Refunds	16.64
Watermelons, 8,925 @ .10	892.50
Implements and machinery on hand September 30, 1932	1,959.34
Hogs on hand September 30, 1932	1,753.00
Feed and seed on hand September 30, 1932	3,445.87
Work animals (20) on hand September 30, 1932	3,040.00
Cattle on hand September 30, 1932	6,800.00
Goats on hand September 30, 1932	346.00
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	\$ 35,791.90

PEL FARM REPORT 1931-'32

Debits

Implements and machinery on hand October 1, 1931	\$ 2,027.12
Hogs on hand October 1, 1931	3,078.00
Feed and seed on hand October 1, 1931	4,370.00
Work animals (21) on hand October 1, 1931	3,645.00
Cattle on hand October 1, 1931	6,475.00
Agricultural and botanical supplies	2,233.00
Bedding	56.81
Board of attendants	420.00
Cattle	590.00
Compost	77.40
Depreciation of plant	416.00
Equipment	297.34
Feed	3,805.70
Freight and express	95.66
Garbage	235.87
Hauling, etc.	87.00
Hogs purchased	145.00
Horse shoeing	67.15
Insurance on buildings and livestock	222.51
Interest on amount invested in cows	250.00
Interest on amount invested in hogs	12.00
Materials for repairs to equipment, etc.	311.05
Twine, brushes, cans, buckets, axle grease, etc.	183.60
Pay roll	4,170.08

Plowing	255.00
Rent of land (412 acres @ \$2.00)	824.00
Seeds and plants	506.96
Slaughtering	20.00
Veterinarian and veterinary supplies	71.10
Work animals	215.00
Balance in favor of Pel Farm	628.55
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	\$ 35,791.90

The small gain shown on this unit for this year is the result of the summer drought. For the last five years, including this one, the Pel Farm shows an average gain of \$3,848.73.

REPORT OF BUILDING CONSTRUCTION

October 1, 1932.

To the Board of Regents,
South Carolina State Hospital,
Columbia, S. C.

Gentlemen: A report is herewith submitted upon the construction of buildings during the past year.

Your Board authorized a contract to be made for the construction of a ward building for white women in November 1931. The construction proceeded at once but the work on this building was suspended on January 8, 1932, upon orders from the Superintendent.

Work was ordered resumed on April 8, 1932 and the building was completed on June 9, 1932.

The building is one story with outer walls of brick, interior walls of hollow tile, the floors concrete and the roof covered with tin. The "Williams Building" as it has been named, was designed to care for fifty of the old and infirm white women patients and is located north of the female wards of the main building.

The congregate dining room for colored women patients was completed in August 1932.

This building was constructed by the hospital with the assistance of a foreman employed for the work. All of the required materials and sub-contracts were purchased and made in December 1931. These orders and sub-contracts were cancelled on January 8, 1932, but were restored in the early part of April 1932 and the construction of the building proceeded.

This building is one story with outer walls of brick, floor concrete and is an open room trussed over with steel trusses and the roof covered with tin.

The work-room and chapel for the colored women patients occupied space in the ward building. The construction of this building to be used for these purposes provided additional bed spaces in the ward building.

The building is the future congregate dining-room and is a wing of the proposed main kitchen and dining-room building.

The ever increasing demands for admissions make it necessary to develop more space for beds.

The Superintendent advises that the more crowded departments are the white male and the colored female wards. The plan of development adopted some time ago included the re-building of the Parker Building, formerly occupied by colored male patients. About one-half of this building has already been re-built and has capacity for 173 beds. It is recommended that the re-building of this building be completed which would provide 107 additional beds. The cost of this re-building would be \$25,000.00.

Additional space for colored women patients and for the complete segregation of the races is essential at this time. It is recommended that a building be constructed at State Park similar to the existing receiving wards for the male patients. Such a building would provide space for 229 beds. The cost of this building would be \$100,000.00.

The cost of construction at this time is very low and the need of employment is acute, and we trust that your Board may be allowed sufficient appropriations to continue the development of the hospital to meet the demands of the people of the State.

Respectfully submitted

GEORGE E. LAFAYE.

Lafaye and Lafaye, Architects.